Fill in this information to identify your case:		
United States Bankruptcy Court for the :		
NORTHERN District of ILLIN (State)	IOIS	
Case Number (If known):	Chapter you are filing under: ■Chapter 7	
	Chapter 11 Chapter 12 Chapter 13	Check if this is amended filing

# **Official Form 101**

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Jason First name	Fany First name
	identification (for example, your driver's license or	Daniel Middle name	Middle name
	passport).  Bring your picture	Mandelman Last name	Mandelman Last name
	identification to your meeting with the trustee.	<u></u>	
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>0974</u>	xxx - xx - <u>8530</u>
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx	9xx - xx

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Document Mandelman Jason Daniel Debtor 1 Case Number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names	Business name  Business name  EIN  EIN	Business name  Business name  EIN  EIN
5. Where you live	5586 Cambridge Way Number Street	If Debtor 2 lives at a different address:  Number Street
	Hanover Park IL 60133 City State ZIP Code  DUPAGE County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number Street	City State ZIP Code  County  If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.  Number Street
	City State ZIP Code	City State ZIP Code
6. Why you are choosing this district to file for bankruptcy.	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408

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Jason Debtor 1

Case 16-15141 Doc 1 Entered 05/03/16 14:39:26 Desc Main Document Page 3 of 66 Daniel Mandelman Case Number (if known) \_ Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals The chapter of the Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file Chapter 7 under ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No bankruptcy within the <sub>District</sub> None last 8 years? \_\_\_\_\_ When \_\_\_ ☐ Yes. Case Number MM / DD / YYYY District None \_\_ When \_\_\_ \_\_\_ Case Number \_\_\_ MM / DD / YYYY \_\_\_\_\_ When \_\_\_ \_\_\_\_\_ Case Number \_\_\_ MM / DD / YYYY No 10. Are any bankruptcy cases pending or being filed by a spouse who is Yes. not filing this case with \_\_\_\_\_ When \_\_\_\_\_ Case Number, if known \_\_\_\_\_ you, or by a business MM / DD / YYYY parter, or by affiliate? Relationship to you \_ When \_ Case Number, if known \_\_\_\_ District MM / DD / YYYY

11. Do you rent your residence?

☐ No. Go to line 12

> Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1 Jason Daniel Document Mandelman

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Case Number (if known)

2.	Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a	■ No. □ Yes.	Go to Part 4.  Name and location of b	ousiness				
	business you operate as an individual, and is not a separate legal entity such as		Name of business, if any					
	a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it to this petition.		Number Street					
	to the potition.		City			St	 ite	Zip Code
			Check the appropriate	box to describe	your business:			
			☐ Health Care Busi	ness (as define	l in 11 U.S.C. § 101	(27A))		
			☐ Single Asset Rea	l Estate (as defi	ned in 11 U.S.C. § 1	I01(51B))		
			☐ Stockbroker (as o	defined in 11 U.S	S.C. § 101(53A))			
			☐ Commodity Broke	er (as defined in	11 U.S.C. § 101(6)	)		
			■ None of the above	е				
	For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	□ No. I	am not filing under Chapter the Bankruptcy Code.  am filing under Chapter am filing under Chapter Bankruptcy Code.	11, but I am NC				
Pa	t 4: Report if You Own or Ha	ve Any Hazard	ous Property or Any Prop	erty That Needs	Immediate Attentio	n		
4.	Do you own or have any	No.						
•	property that poses or is alleged to pose a threat of imminent and	_	What is the hazard?					
	indentifiable hazard to							
	public health or safety? Or do you own any							
	property that needs immediate attention? For example, do you own perishable goods, or livestock		If immediate attention is	needed, why is	it needed?			
	that must be fed, or a building that needs urgent repairs?							
			Where is the property?		Ctroot			
				Number	Street			
				City			State	e ZIP Code

Debtor 1

Daniel

Document Mandelman Page 5 of 66

Jason

Case Number (if known) \_

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing ab	ou
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing abou	ιt
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-15141 Doc 1 Filed 05/03/16 Entered 05/03/16 14:39:26 Desc Main Document Page 6 of 66 Jason Daniel Mandelman Debtor 1 Case Number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is No. excluded and administrative expenses Yes. are paid that funds will be available for distribution to unsecured creditors? 1-49 1,000-5,000 **2**5,001-50,000 How many creditors do **50-99** you estimate that you 5,001-10,000 **5**0,001-100,000 owe? ☐ More than 100,000 **100-199** 10,001-25,000 200-999 \$0-\$50,000 **□** \$1,000,001-\$10 million □\$500,000,001-\$1 billion How much do you estimate your assets to \$50,001-\$100,000 □ \$10,000,001-\$50 million □\$1,000,000,001-\$10 billion be worth? **\$100,001-\$500,000** □ \$50,000,001-\$100 million **□**\$10,000,000,001-\$50 billion □ \$500,001-\$1 million □ \$100,000,001-\$500 million ☐More than \$50 billion **\$0-\$50,000** □ \$1.000.001-\$10 million □\$500,000,001-\$1 billion How much do you estimate your liabilities \$50,001-\$100,000 □ \$10,000,001-\$50 million □\$1,000,000,001-\$10 billion to be? **\$100,001-\$500,000** □ \$50,000,001-\$100 million □\$10,000,000,001-\$50 billion □ \$500,001-\$1 million □ \$100,000,001-\$500 million ☐ More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Jason Daniel Mandelman
Signature of Debtor 1

/s/ Fany Mandelman
Signature of Debtor 2

Executed on \_\_\_05/02/2016

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Debtor 1	Jason	Daniel	Mandelman	Case Number (if known)
	First Name	Middle Name	Last Name	

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

🗶 /s/ Daniel Fasman	Date	Date:	05/02/2016
Signature of Attorney for Debtor		MM / D	D / YYYY
Daniel Fasman			
Printed name			
Geraci Law L.L.C.			
Firm name			
55 E. Monroe St., #3400			
Number Street			
Number Street			
Number Street			
Jumber Street Chicago	IL	6060	3
Chicago	ILState		O Code
Chicago	State	ZIF	Code
	State	ZIF	
Chicago	State	ZIF	Code

	Debtor 1	Jason	Daniel	Mandelman
		First Name	Middle Name	Last Name
couse, if filing) First Name Middle Name Last Name	Debtor 2	Fany		Mandelman
	Spouse, if filing)	First Name	Middle Name	Last Name
nited States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State)	nited States	Bankruptcy Court fo	or the : <u>NORTHERN</u> District of	

# Check if this is an amended filing

# Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B	\$ 0
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 32,309
1c. Copy line 63, Total of all property on Schedule A/B	\$ 32,309
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)     2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$27,120
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$32,987
Part 8: Summarize Your Liabilities	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$5,033.44
Schedule J: Your Expenses (Official Form 106J)     Copy your monthly expenses from line 22c of Schedule J	\$5,022.00

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Debtor 1 Jason Daniel Mandelman Case Number (if known)

First Name Middle Name **EntriesDescription** <u>AssetsAmount</u> **LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$6,286.16 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.) \$ 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$ 0.00 9g. Total. Add lines 9a through 9f.

Fill in this in	Caso 16 157			Entered 05/03/16 14:3 0 of 66	39:26 Desc	Main	
	Jason	Daniel	Mandelman	0 0.00			
Debtor 1	First Name	Middle Name	Last Name				
Debtor 2	Fany		Mandelman				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the : _	NORTHERN Distric	ct of <u>ILLINOIS</u> (State)		_		
Case Number					<del></del>	Check if this is	an
	orm 106 A /D					amended filing	
	orm 106A/B						
Schedul	e A/B: Prope	rty					12/15
Part 1:	ur name and case numb	per (if known). Answ			ny additional		
	- '	-	our entries fro Part 1, includin	ng any entries for pages 	>		60.00
-		that number here .			-7		\$0.00
Part 2:	Describe Your Vehicles						
03. Cars, vans No. Yes.	omeone else drives. If yo s, trucks, tractors, sport Describe		•	property? Check one		me or exemptions.	ht
	Nodel:	Shadow	Debtor 1 only	the	o not deduct secured clair e amount of any secured reditors Who Have Claim	claims on Schedule	D:
Y	'ear:	2007	Debtor 2 only		rrent value of the	Current value	
А	approximate Mileage:	9,000	Debtor 1 and Debtor 2 onl	y ent	ire property?	portion you ov	
	Other information:		At least one of the debtors	s and another \$	2,500.00	\$	2,500.00
[			Check if this is communications instructions)	unity property (see			
M	flake:	Cadillac	Who has an interest in the		not deduct secured clair		
N	Model:	SRX	Debtor 1 only		e amount of any secured reditors Who Have Claim		
Y	'ear:	2009	Debtor 2 only	Cui	rrent value of the	Current value	of the
А	pproximate Mileage:	115,000	Debtor 1 and Debtor 2 onl  At least one of the debtors	ent	tire property?	portion you ov	/n?
C	Other information:			\$	9,575.00	\$	9,575.00
			Check if this is communinstructions)	unity property (see			
			_				

Official Form 106A/B Record # 707350 Schedule A/B: Property Page 1 of 7

De

ebtor 1	Jason	Case 16-15141 D	oc 1	Filed 05/03/16  Document	Entered 05/03/16 14:39:26 Page 11 of 66 Humber (if known)	Desc Main
	First Name	Middle Name		Last Name	Page II 01 00	

Pá	art 2:	Describe Your Vel	hicles			
_		_	<u>-</u>	any vehicles, whether they are registered or not? Include any so report it on Schedule G: Executory Contracts and Unexpired		
03.	Cars, van: No. Yes.		s, sport utility vehicles, mo	torcycles		
	r	Make: Model: Year:	Cadillac STS 2010	Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only	the amount of any secur Creditors Who Have Cla	claims or exemptions. Put red claims on Schedule D: aims Secured by Property
		Approximate Milea	age: 109,000	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Other information:		Check if this is community property (see instructions)	\$12,750.0	00 \$ 12,750.00
	No.  Yes.	: Boats, trailers, moto	ors, personal watercraft, fishing	vessels, snowmobiles, motorcycle accessories		
		-		our entries fro Part 2, including any entries for pages>		\$ 24,825.00
Pa	art 3:	Describe Your Per	rsonal and Household Items			
Doy	ou own o	or have any legal	or equitable interest in any	of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions
06.		d goods and furn : Major appliances, f	nishings iurniture, linens, china, kitchenw	are		
	Yes.	Describe	Furniture, linens, small appliar	nces, table & chairs, bedroom set	\$500	\$500.00
07.		: Televisions and rac	dios; audio, video, stereo, and di including cell phones, cameras,	igital equipment; computers, printers, scanners; music media players, games		
	Yes.	Describe	Flat screen TV, computer, prin	eter, music collection, cell phone	\$1,000	\$ <u>1,000.0</u> 0
08.	Examples		nes; paintings, prints, or other al collections; other collections, me	rtwork; books, pictures, or other art objects; emorabilia, collectibles		
	Yes.	Describe				\$0.00
09.	Examples: and kayak	s; carpentry tools; m	ic, exercise, and other hobby ed	quipment; bicycles, pool tables, golf clubs, skis; canoes		
10	Yes.	Describe				\$0.00
		: Pistols, rifles, shotg	guns, ammunition, and related e	quipment		
	Yes.	Describe				\$0.00

Debtor 1 Jason Case 16-15141 Doc 1 Filed 05/03/16 Entered 05/03/16 14:39:26 Desc Main Document Page 12 of 66 humber (if known)

11.	Clothes Examples:	Everyday clothes,	furs, leather coats, designer wea	ar, shoes, accessories				
	Yes.	Describe	Necessary wearing apparel		\$75		\$	75.00
12.	Jewelry Examples: gold, silver No.	Everyday jewelry,	costume jewelry, engagement ri	ings, wedding rings, heirloom jewelry, watches, gems,				
	Yes.	Describe	Wedding rings, costume jewel	Iry	\$2,000		\$	2,000.00
13.	Non-farm a  Examples:	unimals Dogs, cats, birds,	horses					
	Yes.	Describe	2 pet dogs		\$0		\$	0.00
14.	No.	personal and ho	ousehold items you did not	t already list, including any health aids you did not list		_		
	Yes.	Describe					\$	0.00
			·	, including any entries for pages you have attached				\$3,575.00
	for Part 3.	Write that numb	oer here	>				
I	Part 4:	escribe Your Fir	nancial Assets					
Do	you own or	have any legal	or equitable interest in any	y of the following?		Current vo portion you Do not ded or exemption	ou own' uct secur	?
16.	Examples:	Money you have ir	n your wallet, in your home, in a	safe deposit box, and on hand when you file your petition				
	Yes.	Describe					\$	0.00
17.	Deposits o	=					-	
				rtificates of deposit; shares in credit unions, brokerage houses, th the same institution, list each.				
	Yes.	Describe		Institution name:			_	2.00
			Checking Account Checking Account	Associated Bank Chase Bank			\$	<u>2.00</u> 50.00
			Savings Account	American Chartered Bank			\$	76.00
			Checking Account	American Chartered Bank			\$	1,800.00
							\$	1,928.00
18.			ublicly traded stocks					
	No.	Bona tunas, invesi	tment accounts with brokerage fi	irms, money market accounts				
	Yes.	Describe	Institution or issuer name:					4 004 00
				McDonald's Stock			\$	1,281.00 1,281.00
19.	Non-public	ly traded stock	and interests in incorporat	ted and unincorporated businesses, including an interest in			<b>\$</b>	1,201.00
	Yes.	Describe	Name of Entity and Percen	at of Ownership:			\$	0.00
20.	Negotiable	instruments includ	le personal checks, cashiers' che	ble and non-negotiable instruments ecks, promissory notes, and money orders. someone by signing or delivering them.			<b>-</b>	
	No. Yes.	Describe	Issuer name:				•	0.00

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21.	Retirement	t or pension acc	counts				
	Examples:	Interests in IRA, E	RISA, Keogh, 401(k), 403(b), thrift savings	accounts, or other pension or profit-sharing plans			
	Yes.	Describe	Type of account and Institution name	e:			
	<u> </u>		IRA	Oppenheimer ROTH IRA		\$	700.00
						\$	700.00
22.	Security de	eposits and pre	payments				
			osits you have made so that you may conting andlords, prepaid rent, public utilities (election)				
	Yes.	Describe	Institution name or individual:				
	165.	Describe	Security deposit on rental unit	Landlord		<b>s</b> 1	,850.00
			Totaling top contain and			¢	0.00
23.	Annuities (	(A contract for a	a periodic payment of money to you,	, either for life or for a number of years)		Ψ	
	Yes.	Describe	Issuer name and description:				
		20001120				\$	0.00
24.		n an education I §§ 530(b)(1), 529A		E program, or under a qualified state tuition program.			
	Yes.	Describe	Institution name and description. Sep	parately file the records of any interests.11 U.S.C. § 521(c):		\$	0.00
25.	Trusts, equ	uitable or future	interests in property (other than an	ything listed in line 1), and rights or powers		-	
	Yes.	Describe				\$	0.00
26.	Patents, co	opyrights, trade	marks, trade secrets, and other inte	llectual property			
		Internet domain na	ames, websites, proceeds from royalties an	d licensing agreements			
	No.						
	Yes.	Describe				•	0.00
27	l iconsos 1	franchises and	other general intangibles			\$	0.00
				holdings, liquor licenses, professional licenses			
	Yes.	Describe					
	_					\$	0.00
Мо	ney or prop	erty owed to yo	u?			Current value of the portion you own?  Do not deduct secured	
						or exemptions	
28.	Tax refund	s owed to you					
	Yes.	Describe				\$	0.00
29.	Examples:	-	sum alimony, spousal support, child suppor	t, maintenance, divorce settlement, property settlement		<u> </u>	
	Yes.	Describe				\$	0.00
30.	Other amo	unts someone o	owes you			<b>*</b>	
			ability insurance payments, disability benefitid loans you made to someone else	fits, sick pay, vacation pay, workers' compensation,			
	Yes.	Describe	Pending Social Security disability claim			\$	0.00
31.	Interest in	insurance polic	ies			<b>*</b>	
		-		SA); credit, homeowner's, or renter's insurance			
	No.		Company Name & Beneficiary:				
	Yes.	Describe					
			Health insurance Term life insurance		\$0 \$0		
			Tom ille illourance		Ψ0	\$	0.00
4							

32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. Yes. Describe..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. Describe..... Yes. 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights Describe..... Yes. 0.00 35. Any financial assets you did not already list No. Yes. Describe..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$5,759.00 for Part 4. Write that number here .....---Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Yes. Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned Describe..... Yes. 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe..... 0.00 41. Inventory No. Yes. Describe..... 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations Yes Describe.....

0.00

Debtor 1 Jason Case 16-15141 Doc 1 Filed 05/03/16 Entered 05/03/16 14:39:26 Desc Main Page 15 of 66

44. Any business-related property you did not already list  No.	
Yes. Describe	\$0.00
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$ 0.00
Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  If you own or have an interest in farmland, list it in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.	
Yes. Describe	\$0.00
47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.	
Yes. Describe	s 0.00
48. Crops—either growing or harvested  No.	· · ·
Yes. Describe	\$0.00
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.	
Yes. Describe	\$0.00
50. Farm and fishing supplies, chemicals, and feed No.	
Yes. Describe	\$ <u>0.0</u> 0
51. Any farm- and commercial fishing-related property you did not already list  No.	
Yes. Describe	\$0.00
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here>	\$0.00
Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No.	
Yes. Describe	s 0.00
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$ 0.00

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First Name

Desc Main

Part 8: List the Totals of Each Part of this Form		
55. Part 1: Total real estate, line 2		\$ 0.00
56. Part 2: Total vehicles, line 5	\$ 24,825.00	
57. Part 3: Total personal and household items, line 15	\$ 3,575.00	
58. Part 4: Total financial assets, line 36	\$ 5,759.00	
59. Part 5: Total business-related property, line 45	\$ 0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00	
61. Part 7: Total other property not listed, line 54	\$ 0.00	
62. <b>Total personal property.</b> Add lines 56 through 61	\$ 34,159.00	\$ 34,159.00
63. <b>Total of all property on Schedule A/B.</b> Add line 55 + line 62		\$34,159.00

Record # 707350 Page 7 of 7 Official Form 106A/B Schedule A/B: Property

Fill in this in	formation to iden	tify your case:	
Debtor 1	Jason	Daniel	Mandelman
	First Name	Middle Name	Last Name
Debtor 2	Fany		Mandelman
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for	the : <u>NORTHERN</u> District of _	<u>ILLINOIS</u>
			(State)
Case Number	r		_
(If known)			

# Official Form 106C

### **Schedule C: The Property You Claim as Exempt**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	fy the Property You Claim as Exempt			
1. Which set of ex	emptions are you claiming? Check	one only, even if your spo	ouse is filing with you.	
You are clai	ming state and federal nonbankrupto	cy exemptions . 11 U.S.C.	§ 522(b)(3)	
You are clai	ming federal exemptions. 11 U.S.C.	§ 522(b)(2)		
2. For any propert	y you list on <i>Schedule A/B</i> that yo	u claim as exempt, fill in t	the information below.	
-	on of the property and line on hat lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	2009 Cadillac SRX with over 115,000 miles	\$_9,575	\$1,191	735 ILCS 5/12-1001(b) - \$1,191.00
Line from Schedule A/B:	03		100% of fair market value, up to any applicable statutory limit	
			any applicable statutory limit	705    00 5/40 4004/
Brief description:	2007 Honda Shadow with over 9,000 miles.	\$ 2,500	<b></b> \$	735 ILCS 5/12-1001(c) - \$2,400.00 735 ILCS 5/12-1001(b) - \$100.00
·			_	733 1200 3/12-100 1(b) - \$100.00
Line from Schedule A/B:	03		100% of fair market value, up to any applicable statutory limit	
Brief description:	2010 Cadillac STS with over 109,000 miles	<sub>\$</sub> 12,750	\$ 2,400	735 ILCS 5/12-1001(c) - \$2,400.00
accompain.		<u> </u>		
Line from Schedule A/B:	03		100% of fair market value, up to any applicable statutory limit	
Brief	Furniture, linens, small appliances,		_	735 ILCS 5/12-1001(b) - \$500.00
description:	table & chairs, bedroom set	\$_500	<b>\$</b>	
Line from Schedule A/B:	06		100% of fair market value, up to any applicable statutory limit	
Official Form 1060	Record # 707350	Schedule C: T	he Property You Claim as Exempt	Page 1 of 3

ر <sub>r 1</sub> Jason	ase 16-15141 Dani		Filed 05/03/16 Dogument	Entered 05/03/16 14:39 Page 18 of 66 Number (if known)	3.20 Desc Main
First Name	Middle		Last Name	Case Number (if known)	
Addit	tional Page				
	on of the property and lir	ne on	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Flat screen TV, computer music collection, cell pho		\$_1,000	\$	735 ILCS 5/12-1001(b) - \$1,000.00
_ine from Schedule A/B:	07			100% of fair market value, up to any applicable statutory limit	
Brief description:	Necessary wearing appar	rel	\$ <u>75</u>	<b>\  \\$</b>	735 ILCS 5/12-1001(a),(e) - \$75.00
ine from Schedule A/B:	11			100% of fair market value, up to any applicable statutory limit	
Brief description:	Wedding rings, costume	iewelry	\$_2,000	\$	735 ILCS 5/12-1001(b) - \$2,000.00
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	
Brief description:	Checking Account, Associately Bank, 2.00	ciated	\$_2	<b>\  \\$</b>	735 ILCS 5/12-1001(b) - \$2.00
_ine from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	Checking Account, Chase 50.00	e Bank,	\$_50	<b></b>	735 ILCS 5/12-1001(b) - \$50.00
_ine from	17			100% of fair market value, up to	

Brief	Flat screen TV, computer, printer,	Schedule A/B		735 ILCS 5/12-1001(b) - \$1,000.00
description:	music collection, cell phone	\$_1,000	\$	
ine from Schedule A/B:	<u>07</u>		100% of fair market value, up to any applicable statutory limit	
Brief description:	Necessary wearing apparel	<sub>\$_</sub> 75	\$	735 ILCS 5/12-1001(a),(e) - \$75.00
ine from Schedule A/B:	11		100% of fair market value, up to any applicable statutory limit	
Brief description:	Wedding rings, costume jewelry	\$_2,000	\$	735 ILCS 5/12-1001(b) - \$2,000.00
ine from Schedule A/B:	12		100% of fair market value, up to any applicable statutory limit	
Brief description:	Checking Account, Associated Bank, 2.00	\$_2	\$	735 ILCS 5/12-1001(b) - \$2.00
ine from Schedule A/B:	<u>17</u>		100% of fair market value, up to any applicable statutory limit	
Brief description:	Checking Account, Chase Bank, 50.00	\$_ 50	\$	735 ILCS 5/12-1001(b) - \$50.00
Line from Schedule A/B:	<u>17</u>		100% of fair market value, up to any applicable statutory limit	
Brief description:	Savings Account, American Chartered Bank, 76.00	\$_ 76	\$	735 ILCS 5/12-1001(b) - \$76.00
ine from Schedule A/B:	<u>17</u>		100% of fair market value, up to any applicable statutory limit	
Brief description:	Checking Account, American Chartered Bank, 1,800.00	\$_1,800	<b></b> \$	735 ILCS 5/12-1001(b) - \$1,800.00
Line from Schedule A/B:	<u>17</u>		100% of fair market value, up to any applicable statutory limit	
Brief description:	, McDonald's Stock, 1,281.00	\$_1,281	<b></b>	735 ILCS 5/12-1001(b) - \$1,281.00
ine from Schedule A/B:	18		100% of fair market value, up to any applicable statutory limit	
Brief description:	IRA, Oppenheimer ROTH IRA, 700.00	\$_700	\$	735 ILCS 5/12-1006 - \$0.00
ine from Schedule A/B:	21		100% of fair market value, up to any applicable statutory limit	
Brief lescription:	Pending Social Security disability claim	\$Unknown	\$	735 ILCS 5/12-1001(g)(1)(2)(3) - \$0.00
ine from Schedule A/B:	30		100% of fair market value, up to any applicable statutory limit	

Debtor 1 Jason Daniel Document Page 19 of 66 Case Number (if known)

Last Name

Middle Name

**Additional Page** Part 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes. 707350 Official Form 106C Record # Schedule C: The Property You Claim as Exempt Page 3 of 3

H	II in this in	formation to ide		oc 1	Entered 05/03/	16 14:39:26	Desc Main	
ГІ	II III UIIS III	iormation to lue	illily your case.		0 of 66			
De	ebtor 1	Jason	Danie	l Mandelman				
		First Name	Middle Nam					
	ebtor 2	Fany		Mandelman				
(S <sub>I</sub>	pouse, if filing)	First Name	Middle Nam	ne Last Name				
Uı	nited States	Bankruptcy Court f	or the : <u>NORTHERN</u>	District of _ILLINOIS				
C	ase Number			(State)			Check if this	s is an
(It	f known)						amended fil	ing
Off	icial F	orm 106D	)					
			<del>-</del>	e Claims Secured by P	roperty			12/1
				arried people are filing together, both		or supplying correct		
			eded, copy the Add me and case numbe	itional Page, fill it out, number the en	tries, and attach it to this	form. On the top of a	ny	
		-	ns secured by your	,				
г	_			he court with your other schedules. You	u have nothing also to repu	art on this form		
Ė				the court with your other scriedules. For	Thave nothing else to repo	ort on this ionn.		
	Yes. Fil	I in all of the info	rmation below.					
Pa	art 1:	List All Secured C	Claims					
						Column A	Column A	Column C
				han one secured claim, list the creditor particular claim, list the other creditors	· ·	Amount of claim	Value of collateral	Unsecured
				ical order according to the creditors nar		Do not deduct the value of collateral	that supports this claim	<b>portion</b> If any
2.1				December the managery that accura	a the eleim.	<b>\$</b> 16,702.00	<b>\$</b> 12,750.00	<b>\$</b> 3,952.00
2.1	ALLYF			Describe the property that secure		10,7 02.00	<b>4</b> 12,7 00.00	<u>\$_0,002.00</u>
	Creditor's I 200 Rer	name naissance Ctr		2010 Cadillac STS with over 109	,000 miles			
	Number	Street						
				As of the date you file, the claim is	s: Check all that apply.	_		
	Detroit		MI 48243	Contingent				
	City		State Zip Code	Unliquidated				
	14/1-	41		Disputed				
	Debtor	the debt? Check  1 only	one.	Nature of Lien. Check all that apply  An agreement you made (such as				
	Debtor 2	,		car loan)	mongago or coource			
	Debtor	1 and Debtor 2 only	/	Statutory lien (such as tax lien, me	echanic's lien)			
	At least	one of the debtors	and another	Judgment lien from a lawsuit				
	□ Check	if this claim relate	es to a	Other (including a right to offset) _				
	_	unity debt			4405			
	Date Debt	was incurred	2013-10-31	Last 4 digits of account number _	<u>4465</u>	10.440.00	0.575.00	0.40.00
2.2	CHASE			Describe the property that secure		\$ <u>10,418.00</u>	\$ <u>9,575.00</u>	\$ <u>843.00</u>
	Creditor's I Po Box			2009 Cadillac SRX with over 115	,000 miles			
	Number	Street						
				As of the date you file, the claim is	s: Check all that apply.			
	Calumah		OLL 42224	Contingent				
	Columb	us	OH 43224 State Zip Code	Unliquidated				
	Oity		State Zip Sode	Disputed				
	_	the debt? Check	one.	Nature of Lien. Check all that apply				
	Debtor 2	•		An agreement you made (such as	mortgage or secured			
	=	z only 1 and Debtor 2 only	ı	car loan)  Statutory lien (such as tax lien, me	echanic's lien)			
	=	one of the debtors		Judgment lien from a lawsuit				
	_			Other (including a right to offset) _				
	_	if this claim relate unity debt	es to a					
		was incurred	2013-04-13	Last 4 digits of account number _	<u>3120</u>			
	Add the d	lollar value of yo	our entries in Colum	n A on this page. Write that number I	nere:	\$ <u>27,120.00</u>		

Fill ir	n this inf	Caco 16 151/11  formation to identify your case		Eilad 05/02/16	Entered 05/03 1 of 66	3/16 14:39:26	Desc Main	
					1 01 00			
Debte	or 1		Daniel	Mandelman				
		First Name Mi	ddle Name	Last Name <b>Mandelman</b>				
Debto			Iddle Nove					
(Spous	e, if filing)	First Name Mi	ddle Name	Last Name				
Unite	d States	Bankruptcy Court for the : <u>NORT</u>	HERN_ Distri					
Case	Number			(State)			Check if	this is an
(If kno	own)						amended	d filing
Offic	ial Fo	orm 106E/F						
		E/F: Creditors Who		U				12/15
ist the A/B: Pro reditors eeded, op of ar	other party (Cos with party the copy the copy additional comments)	and accurate as possible. Use arty to any executory contract: Official Form 106A/B) and on S artially secured claims that are le Part you need, fill it out, nur ional pages, write your name a list All of Your PRIORITY Unsecutiors have priority unsecured	s or unexpire Schedule G: I e listed in Sc mber the entr and case nur ured Claims	ed leases that could result in a Executory Contracts and Une chedule D: Creditors Who Havies in the boxes on the left. A mber (if known).	n claim. Also list execut expired Leases (Official e Claims Secured by P	tory contracts on <i>Sched</i> Form 106G). Do not incl <i>roperty</i> . If more space is	ule ude any	
=		to Part 2.						
	Yes.							
eac non uns	h claim l priority a ecured o	our priority unsecured claims. listed, identify what type of clair amounts. As much as possible, claims, fill out the Continuation l lanation of each type of claim, s	n it is. If a cla list the claim Page of Part	nim has both priority and nonpri s in alphabetical order accordir 1. If more than one creditor ho	ority amounts, list that cl ig to the creditor's name ds a particular claim, list	aim here and show both . If you have more than to	priority and vo priority	
						Total claim	Priority amount	Nonpriority amount
Part :	2: L	ist All of Your NONPRIORITY Ur	secured Clai	ms				
3. <b>Do</b> a	any cred	ditors have nonpriority unsecu	ıred claims a	gainst you?				
П	No You	u have nothing to report in this p	nart Submit	this form to the court with your	other schedules			
=	Yes.	a nave nearing to report in time p	part. Cabrille	and form to the court with your	outer contoduce.			
4. List non incli	all of your priority of the pr	our nonpriority unsecured clai unsecured claim, list the credito Part 1. If more than one credito ut the Continuation Page of Par	r separately f r holds a part	for each claim. For each claim	isted, identify what type	of claim it is. Do not list o	laims already	
oldii	1110 1111 00	at the continuation rage of rail	· <b>-</b> .					Total claim
7.1		ted HOME Lender	La	ast 4 digits of account number	9441			\$_0.00
-		venue Of Science	w	hen was the debt incurred?	2005-2006			
	Number	Street						
-			_ <u>^</u>	s of the date you file, the claim	s: Check all that apply.			
	San Die	go CA 92128	8 L	Contingent Unliquidated				
	City	State Zip Co	ode	Disputed				
WI		the debt? Check one.	L					
F	Debtor 1 Debtor 2	•	т.	ype of NONPRIORITY unsecure	t claim:			
F	-	I and Debtor 2 only	<u> </u>	Student loans	a Giullii.			
F	;	one of the debtors and another	Ť	Obligations arising out of a separ	ation agreement or divorce			
F	:	if this claim relates to a	_	that you did not report as priority	-			
_	commu	inity debt		Debts to pension or profit-sharing	plans, and other similar de	bts		
		n subject to offest?	_	_				
	No Voc			Other. Specify		_		
	Yes							

Page 22 of 66 Case Number (if known) Document Jason Daniel Debtor 1

sting any entries on this page, number them	beginning with 4.4, followed by 4.5, and so forth.	Total Clain
Adventist Glen Oaks Hospital	Last 4 digits of account number	\$ <u>300.00</u>
Creditor's Name		
75 Remittance Dr., #3215	When was the debt incurred? 2015	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Chicago IL 60675		
City State Zip Code	Unliquidated	
/ho owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offest?	Dobte to periodic or profit distancy and out of similar dobte	
No	Other. Specify Medical/Dental Services	
Yes	Officer. Specify	
Advocate Medical Group	Last 4 digits of account number	<b>\$</b> 43.00
Creditor's Name		
PO Box 92523	When was the debt incurred? 2015	
Number Street		
	As a father date was filler than a later to a Ohard all that and	
	As of the date you file, the claim is: Check all that apply.	
Chicago IL 60675	Contingent	
City State Zip Code	Unliquidated	
/ho owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
<b>=</b>	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another		
Check if this claim relates to a	that you did not report as priority claims	
community debt the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
No	Madical/Dental Consider	
₹	Other. Specify Medical/Dental Service	
Yes Advocate Sherman Hospital	Last 4 digits of account number	<b>\$</b> 1,650.00
Creditor's Name	Last 4 digits of account number	φ <u>1,000.00</u>
1425 N. Randall Rd.	When was the debt incurred? 2016	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
Flain II 00400	Contingent	
Elgin IL 60123	Unliquidated	
City State Zip Code /ho owes the debt? Check one.	Disputed	
Debtor 1 only	<b>_</b>	
<b>=</b>	Time of NONDRIORITY unaccount delains	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offest?		
No	Other. Specify Medical/Dental Service	

		Case 16-15141	Doc 1	Filed 05/03/16	Entered 05/03/16 14:39:26	Desc Main
Debtor 1	Jason	Daniel		Document	Page 23 of 66 Case Number (if known)	
	First Name	Middle Name		Last Name		
Part 2:	Your	NONPRIORITY Unsecured Cla	ims - Continua	tion Page		

After li	sting any entries on this page, number them be	ginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.5	Alexian Brothers Med Center	Last 4 digits of account number	<b>\$</b> 1,500.00
	Creditor's Name	0040	
	800 Biesterfield Rd.	When was the debt incurred? 2016	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Elk Grove Village IL 60007	Unliquidated	
١,	City State Zip Code  Vho owes the debt? Check one.	Disputed	
l i	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
l i	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	=	that you did not report as priority claims	
"	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
1	s the claim subject to offest?		
	No	Other. Specify Medical/Dental Service	
	Yes	<u> </u>	
4.6	Alliance Lab Physicians	Last 4 digits of account number	<u>\$ 9.00</u>
	Creditor's Name	When was the debt incurred? 2015	
	PO Box 5968	When was the debt incurred? 2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Caral Stream II CO407	Contingent	
	Carol Stream         IL         60197           City         State         Zip Code	Unliquidated	
\ v	City State Zip Code  Vho owes the debt? Check one.	Disputed	
[	Debtor 1 only		
Ī	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
l i	Debtor 1 and Debtor 2 only	Student loans	
İ	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
l i	Check if this claim relates to a	that you did not report as priority claims	
'	community debt	Debts to pension or profit-sharing plans, and other similar debts	
!	s the claim subject to offest?		
	No	Other. Specify Medical Debt	
	Yes		<b>150.00</b>
4.7	Allina Health	Last 4 digits of account number	\$ <u>150.00</u>
	Creditor's Name 2925 Chicago Ave	When was the debt incurred? 2016	
	Number Street		
	Name of Career		
		As of the date you file, the claim is: Check all that apply.	
	Minneapolis MN 55407	Contingent	
	City State Zip Code	Unliquidated	
V	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
[	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
[	Debtor 1 and Debtor 2 only	Student loans	
[	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
'	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offest?		
	No	Other. Specify Medical Debt	
	Yes		

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Number Street			
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
Dallas	TX 75240	Unliquidated	
City Who owes the debt? Che	State Zip Code	Disputed	
_	eck one.		
Debtor 1 only		Two (MONDBIODITY was a sense of a letter	
Debtor 2 only		Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 and Debtor 2	-	Obligations arising out of a separation agreement or divorce	
At least one of the debt		that you did not report as priority claims	
Check if this claim re	elates to a	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to o	ffest?	Debts to pension of profit-straining plans, and other similar debts	
No		Other. Specify Collecting for Creditor	
Yes		Cutor. Opcorry	
American Honda Fina	ance	Last 4 digits of account number 6006	<u>\$48.00</u>
Creditor's Name		0000 40 00	
1220 Old Alpharetta F	Rd S	When was the debt incurred? 2006-12-23	
Number Street			
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
Alpharetta	GA 30005	Unliquidated	
City Who owes the debt? Che	State Zip Code	Disputed	
Debtor 1 only	eck one.		
Debtor 2 only		Time of NONDBIODITY uncestred eleims	
= '	anh	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 and Debtor 2  At least one of the debt		Obligations arising out of a separation agreement or divorce	
=		that you did not report as priority claims	
Check if this claim re	elates to a	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to o	ffest?	Dobbe to periodic of profit criaining plane, and outer criminal debte	
No		Other. Specify	
Yes			
.10 Arrow Financial Servi	ices LLC	Last 4 digits of account number	\$ <u>11,949.00</u>
Creditor's Name		2045	
PO Box 10497		When was the debt incurred? 2015	
Number Street			
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
Greenville	SC 29603	Unliquidated	
City Who owes the debt? Che	State Zip Code eck one.	Disputed	
Debtor 1 only		_	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2	only	Student loans	
At least one of the debt	•	Obligations arising out of a separation agreement or divorce	
Check if this claim re		that you did not report as priority claims	
community debt	514163 to a	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to o	ffest?	<b>_</b>	
No		Other. Specify Credit Card or Credit Use	
$\square$			

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After li	sting any entries on this page, number them b	eginning with 4.4, followed by 4.5, an	d so forth.	Total Claim
4.11	ATG Credit	Last 4 digits of account number	6768	\$ <u>50.00</u>
	Creditor's Name			
	1700 W Cortland St Ste 2	When was the debt incurred?	2013-2014	
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
		Contingent		
	Chicago IL 60622	Unliquidated		
l v	City State Zip Code  Vho owes the debt? Check one.	Disputed		
li	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured c	Naim:	
	Debtor 1 and Debtor 2 only	Student loans	idiii.	
	At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla		
"	community debt	Debts to pension or profit-sharing pl		
<u> </u>	the claim subject to offest?			
	No	Other. Specify Medical Debt		
	Yes			
4.12	Bank of New York Mellon	Last 4 digits of account number		\$ <u>0.00</u>
	Creditor's Name One Wall St.	When was the debt incurred?	2015	
	Number Street	when was the dept incurred?		
	Number Sueet			
		As of the date you file, the claim is:	Check all that apply.	
	New York NY 10286	Contingent		
	City State Zip Code	Unliquidated		
v	Vho owes the debt? Check one.	Disputed		
	Debtor 1 only			
[	Debtor 2 only	Type of NONPRIORITY unsecured c	:laim:	
[	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla		
l .	community debt	Debts to pension or profit-sharing plants	ans, and other similar debts	
l R	s the claim subject to offest?	Martina na Pafisi		
	No Yes	Other. Specify Mortgage Defici	ency	
4.13	Caliber HOME Loans, IN	Last 4 digits of account number	8085	\$ 0.00
7.10	Creditor's Name		<del></del>	
	Po Box 24610	When was the debt incurred?	2005-2016	
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
		Contingent		
	Oklahoma City OK 73124	Unliquidated		
v	City State Zip Code  /ho owes the debt? Check one.	Disputed		
li	Debtor 1 only	ш .		
	Debtor 2 only	Type of NONPRIORITY unsecured c	rlaim:	
	Debtor 1 and Debtor 2 only	Student loans	-ruiiii	
	At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla	-	
	community debt	Debts to pension or profit-sharing pl		
<u> </u>	the claim subject to offest?			
	No	Other. Specify		
Ι Γ	7 <sub>V00</sub>			

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Creditor's Name		
	0004.0044	
15000 Capital One Dr	When was the debt incurred? 2004-2011	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Richmond VA 23238	Unliquidated	
City State Zip Code		
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Turn of MONDRIODITY unconsumed alaims	
	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	Dobto to periodical or profit smarring plants, and other similar debto	
No	0 - 1/4 0 1 0 1/4 1	
<b>│</b>	Other. Specify Credit Card or Credit Use	
Yes		007.00
4.15 CEP America Illinois PC	Last 4 digits of account number	<u>\$_207.00</u>
Creditor's Name		
PO Box 582663	When was the debt incurred? 2015	
Number Street		
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Modesto CA 95358		
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Student loans	
Debtor 1 and Debtor 2 only	- Classic Island	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another  Check if this claim relates to a	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
At least one of the debtors and another Check if this claim relates to a community debt	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim relates to a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt	\$ 150.00
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  4.16  Cmre. 877-572-7555	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  4.16  Creditor's Name	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  4.16  Creditor's Name	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396  When was the debt incurred? 2013-2014	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste	□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Debt □ Last 4 digits of account number 2396 □ When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply.	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste  Number Street	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396  When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply.  Contingent	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste Number Street  Brea CA 92821	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396 When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste  Number  Street  Brea  CA 92821  City  State Zip Code	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396  When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply.  Contingent	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt ls the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste  Number Street  Brea CA 92821  City State Zip Code  Who owes the debt? Check one.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396 When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt ls the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste  Number Street  Brea CA 92821  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Debt □ Last 4 digits of account number 2396 □ When was the debt incurred? 2013-2014 □ As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt ls the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste  Number Street  Brea CA 92821  City State Zip Code  Who owes the debt? Check one.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396 When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt ls the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste  Number Street  Brea CA 92821  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Debt □ Last 4 digits of account number 2396 □ When was the debt incurred? 2013-2014 □ As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt ls the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste  Number Street  Brea CA 92821  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Debt □ Last 4 digits of account number 2396 □ When was the debt incurred? 2013-2014 □ As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste Number Street  Brea CA 92821  City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396 When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No Yes  4.16 Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste Number Street  Brea CA 92821  City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396 When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste  Number Street  Brea CA 92821  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396 When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No Yes  4.16 Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste Number Street  Brea CA 92821  City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396 When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	\$ <u>150.00</u>
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No Yes  4.16  Cmre. 877-572-7555  Creditor's Name 3075 E Imperial Hwy Ste  Number Street  Brea CA 92821  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Debt  Last 4 digits of account number 2396 When was the debt incurred? 2013-2014  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$ <u>150.00</u>

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4.17	Colfax Rescue Squad	Last 4 digits of account number	<b>\$</b> 193.00
	Creditor's Name		
	PO Box 417	When was the debt incurred? 2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Colfax WI 54730		
	City State Zip Code	Unliquidated	
_ v	Vho owes the debt? Check one.	Disputed	
[	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
ΙГ	Debtor 1 and Debtor 2 only	Student loans	
Ī	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
7	Check if this claim relates to a	that you did not report as priority claims	
-	community debt	Debts to pension or profit-sharing plans, and other similar debts	
ls	s the claim subject to offest?		
	No	Other. Specify Medical Debt	
Ī	Yes	Otter. Specify	
4.18	Computer Credit Inc.	Last 4 digits of account number	\$ 300.00
1.10	Creditor's Name		
	PO Box 5238	When was the debt incurred? 2016	
	Number Street		
		As of the date can file the plains in Observal all that each	
		As of the date you file, the claim is: Check all that apply.	
	Winston Salem NC 27113	Contingent	
	City State Zip Code	Unliquidated	
v	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
Ī	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Ī	Debtor 1 and Debtor 2 only	Student loans	
İ	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims	
4	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
ls ls	s the claim subject to offest?	books to perision or proficestialing plans, and office similar debts	
	No	Other. Specify Credit Card or Credit Use	
Ī	Yes	Other. Specify	
4.19	Credit Management Control	Last 4 digits of account number	<b>\$</b> 193.00
4.13	Creditor's Name	<u> </u>	
	PO Box 1408	When was the debt incurred? 2016	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Racine WI 53401-1408	Contingent	
	City State Zip Code	Unliquidated	
v	Who owes the debt? Check one.	Disputed	
ΙГ	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
L	Check if this claim relates to a	that you did not report as priority claims	
l le	community debt s the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
	No	Plant of the Debt Owed	
1 -	Ves	Other. Specify Debt Owed	

Debtor 1 Jason Daniel Document Page 28 of 66 Case Number (if known)

Section	After li	sting any entries on this page, number them be	eginning with 4.4, followed by 4.5, and so forth.	Total Claim
P D Box 6154 Namew	4.20		Last 4 digits of account number	\$ 0.00
Number   Street   As of the date you flie, the claim is: Check all that apply.   Contingent   Direct of the debt? Check one.   State 26 Cose   Dispute   D			When was the debt incurred?	
Rapid City SD 57700    Rapid City SD 57700   Silva 7a-Coos   S				
Rapid City SD 57700   Configure   Color State 7 p Cook Who owes the debt? Check one.   Departed   D			As of the date was file the eleter to Oha Lallit at a late	
Rapid City Silb 5700 City Govers the debt7 Check one.				
Cory State 2 pick Core Show own the debt? Check one.    Debtor 1 and Debtor 2 only		Rapid City SD 57709		
Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 7 only   Debtor 6 only   Debtor 6 only   Debtor 6 only   Debtor 7 only   Debtor 6 only   Debtor 6 only   Debtor 7 only   Debtor 7 only   Debtor 6 only   Debtor 7 only   Debtor 7 only   Debtor 6 only   Debtor 7 only   Debtor 6 onl		City State Zip Code		
Debtor 2 only   Debtor 3 and Debtor 2 only   Debtor 4 and Debtor 3 only Debtor 3 and Debtor 3 only Debtor 4 and Debtor 5 only	Y	Who owes the debt? Check one.	Disputed	
Debtor 1 and Debtor 2 only   Al Seast one of the debtors and another   Check if this claim relates to a community debt is the claim subject to offest?   No   Yes   Carlo Stream   L 60197   Others Specify   Men was the debt incurred?   2016   Others Specify   Men was the debt incurred?   Al Seast one of the debtors and another   Others Specify   Medical Debt   Al Seast one of the debtors and another   Others Specify   Medical Debt   Al Seast one of the debtors and another   Others Confirment   Others	<u> </u>	<b>=</b>		
Al least one of the debtors and another   Chrock if this claim relates to a community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is debt of the claim subject to offest?   Community debt is debt of the claim is community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim is community debt is the claim is community debt is the claim is community debt is the claim is community debt is the claim is community debt is the claim is community debt is the claim is audient to offest?   Community debt is the claim is apparation agreement or divorce that is a postation are implied to a populate of the debtors and another is debt claim is contend to the community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest?   Community debt is the claim subject to offest	<u> </u>	<b>=</b> '		
Check if this claim relates to a community death   Check on the claim subject to offest?   Carol Stream   L	<u> </u>	<b>=</b>		
community debt Is the claim subject to offest?  No    Community		At least one of the debtors and another		
Is the claim subject to offest?    Other: Specify   Mortgage Deficiency	L			
No   Yes   Last 4 digits of account number   \$ 2.295.00	1		Debts to pension or profit-sharing plans, and other similar debts	
Ves   Steed Core Radiology	ľ	-	Other Courie. Mortrage Deficiency	
Elk Grove Radiology	Ī		Other, Specify	
Cordistr's Name PO Box 4543 Number Street  As of the date you file, the claim is: Check all that apply.  Carol Stream IL 60197 City State 2 p Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Community debt Is the claim relates to a community debt Is the claim subject to offest?  As of the date you file, the claim is: Check all that apply.  Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Other. Specify Medical Debt  Ves  4 22 HY UTIE/ROYAL PRESTIGE Creditor's Name 333 Holtzman Rd Number Street  As of the date you file, the claim is: Check all that apply.  When was the debt incurred? 2013-2015  When was the debt incurred? 2013-2015  As of the date you file, the claim is: Check all that apply.  Contingent Uniquidated Disputed  As of the date you file, the claim is: Check all that apply.  Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 file claim relates to a community debt Is the claim subject to offest?  Other. Specify  Type of NONPRIORITY unsecured claim: Debto to pension or profit-sharing plans, and other similar debts  Other. Specify Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 file claim relates to a community debt Debtor 1 pension or profit-sharing plans, and other similar debts	4.21		Last 4 digits of account number	\$ 2,295.00
Number Street  As of the date you file, the claim is: Check all that apply.  Carol Stream  L 60197 City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  Madison Windows Street  As of the date you file, the claim is: Check all that apply.  Contingent Undiquidated Disputed Disp		Creditor's Name		
As of the date you file, the claim is: Check all that apply.    Carol Stream		PO Box 4543	When was the debt incurred? 2016	
Carol Stream    L 60197   State   Zip Code   Disputed		Number Street		
Carol Stream II. 60197 City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 4 least one of the debtors and another Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Ves  4 22  HY CITE/ROYAL PRESTIGE Last 4 digits of account number			As of the date you file, the claim is: Check all that apply.	
City State Zip Code Who owes the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Mo Ves  4.22 HY CITE/ROYAL PRESTIGE Creditor's Name 333 Holtzman Rd Number Street  Madison WI 53713 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Debtor 1 only Debtor 2 only Debtor 1			Contingent	
Debtor 1 only			Unliquidated	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  Madison Wi 53713 City Who owes the debt? Check one.  Madison 2 Object 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts  Last 4 digits of account number 2561 State 4 digits of account number 2013-2015  When was the debt incurred? 2013-2015  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Other. Specify Medical Debt  Last 4 digits of account number 2561 State 2013-2015  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Objector 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 ded bebtor and another Check if this claim relates to a community debt Is the claim subject to offest?  No Other. Specify	v		Disputed	
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Debtor 1 and Debtor 2 only	li	╡ '	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Other. Specify Medical Debt  When was the debt incurred? 2561  Creditor's Name 333 Holtzman Rd  Number Street  Madison WI 53713 City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  Other. Specify Medical Debt  When was the debt incurred? 2561  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Cobligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  Other. Specify  Other. Specify  When was the debt incurred? 2013-2015  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts	li	<b>=</b>		
Check if this claim relates to a community debt   Debts to pension or profit-sharing plans, and other similar debts	li	<b>=</b>		
community debt is the claim subject to offest?  No Other. Specify Medical Debt  Other. Specify Medical Debt  Other. Specify Medical Debt  Other. Specify Medical Debt  Other. Specify Medical Debt  Other. Specify Medical Debt  Steet  As 4 digits of account number 2561 \$83.00  When was the debt incurred? 2013-2015  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt is the claim subject to offest?  No Other. Specify Medical Debt  When was the debt incurred? 2013-2015  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Other. Specify	l i			
No			Debts to pension or profit-sharing plans, and other similar debts	
Yes	ls	s the claim subject to offest?		
A.22   HY CITE/ROYAL PRESTIGE   Last 4 digits of account number   2561   \$83.00		No	Other. Specify Medical Debt	
Creditor's Name 333 Holtzman Rd  Number Street  Madison WI 53713 City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  Creditor's Name 333 Holtzman Rd When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Student loans Debtor 3 a priority claims Debts to pension or profit-sharing plans, and other similar debts  Tother. Specify Other. Specify  Other. Specify	$\vdash$		0564	<b>•</b> 92 00
Madison   WI   53713   Contingent   When was the debt incurred?   2013-2015	4.22		Last 4 digits of account number 200	\$ 63.00
Madison   WI   53713   City   State   Zip Code   Who owes the debt? Check one.   Type of NONPRIORITY unsecured claim:   Student loans   Check if this claim relates to a community debt   State   State   Debts 1 offest?   Other. Specify   Other.			When was the debt incurred? 2013-2015	
Madison  City Nho owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Other. Specify				
Madison  City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Other. Specify			As of the date you file the claim in Charles II that are by	
Madison WI 53713 City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  Other. Specify Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify				
City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims community debt Debts to pension or profit-sharing plans, and other similar debts  Is the claim subject to offest?  No Other. Specify		Madison WI 53713		
Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify		City State Zip Code		
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify	<u> </u>	Who owes the debt? Check one.	Disputed	
Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Other. Specify		<b>=</b>		
At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Other. Specify	<u> </u>	<b>=</b>		
Check if this claim relates to a community debt	[	<b>=</b>		
community debt  Is the claim subject to offest?  No  Other. Specify		At least one of the debtors and another		
Is the claim subject to offest?  No Other. Specify	[	_		
No Other. Specify	,	•	Debts to pension or profit-sharing plans, and other similar debts	
Other Specify		-	Other Consider	
		Yes	Other. Specify	

Doc 1 Filed 05/03/16 Entered 05/03/16 14:39:26 Desc Main Case 16-15141

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After lis	sting any entries on this page, number them be	ginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.23	Illinois Lab Medicine Assoc LTD	Last 4 digits of account number	\$ <u>66.00</u>
	Creditor's Name	2040	
	PO Box 5966	When was the debt incurred? 2016	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Carol Stream IL 60197	Unliquidated	
v	City State Zip Code  Vho owes the debt? Check one.	Disputed	
Г	Debtor 1 only		
Ī	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Ī	Debtor 1 and Debtor 2 only	Student loans	
Ī	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Ī	Check if this claim relates to a	that you did not report as priority claims	
-	community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is	s the claim subject to offest?		
	No	Other. Specify Medical Debt	
$\vdash$	Yes Kohls/Capone	Last 4 digits of account number NULL	<b>\$</b> 1,369.00
4.24	Creditor's Name	Last 4 digits of account number NULL	\$ 1,000.00
	N56 W 17000 Ridgewood Dr	When was the debt incurred? 2005-2010	
	Number Street	<del></del>	
		As of the date you file the claim is. Check all that apply	
		As of the date you file, the claim is: Check all that apply.	
	Menomonee Falls WI 53051	Contingent	
	City State Zip Code	Unliquidated	
"	/ho owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
<u> </u>	Debtor 1 and Debtor 2 only	Student loans	
<u> </u>	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
L	Check if this claim relates to a	that you did not report as priority claims	
ls	community debt s the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
ì	No	Other. Specify Credit Card or Credit Use	
Ī	Yes	Office. Specify	
4.25	Malcolm S. Gerald and Assoc.	Last 4 digits of account number	<u>\$ 600.00</u>
	Creditor's Name		
	332 S. Michigan Ave., Ste. 600	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Obias as	Contingent	
	Chicago IL 60604	Unliquidated	
v	City State Zip Code  Vho owes the debt? Check one.	Disputed	
Г	Debtor 1 only		
[	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
[	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
7	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is	s the claim subject to offest?		
	No	Other. Specify Credit Card or Credit Use	
	Yes		

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After lis	sting any entries on this page, number them be	eginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.26	Medical Recovery Specialists	Last 4 digits of account number	<b>\$</b> 150.00
1.20	Creditor's Name		
	2250 E. Devon Ave., Ste. 352	When was the debt incurred? 2015	
	Number Street		
		As of the date you file the plain in Check all that apply	
		As of the date you file, the claim is: Check all that apply.	
	Des Plaines IL 60018	Contingent	
	City State Zip Code	Unliquidated	
l v	Who owes the debt? Check one.	Disputed	
ΙГ	Debtor 1 only		
ΙĒ	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
l ř	Debtor 1 and Debtor 2 only	Student loans	
l i	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
}		that you did not report as priority claims	
4	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is	s the claim subject to offest?	Debts to pension of profit-sharing plans, and other similar debts	
	No	Other, Specify Medical/Dental Services	
l ī	Yes	Other. Specify Medical/Dental Services	
4.27	Merchants Credit Guide	Last 4 digits of account number 4813	<b>\$</b> 210.00
4.21	Creditor's Name		•
	223 W Jackson Blvd Ste 4	When was the debt incurred? 2014-2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Chicago IL 60606	Contingent	
	City State Zip Code	Unliquidated	
l v	Vho owes the debt? Check one.	Disputed	
Ιг	Debtor 1 only		
l	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
1 7	<b>=</b>	Student loans	
H	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
L	Check if this claim relates to a	that you did not report as priority claims	
le le	community debt s the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
"	No	Madical Dalu	
1 7	=	Other. Specify Medical Debt	
1.00	Yes MiraMed Revenue Group	Lost A digita of account number	\$ 200.00
4.28	Creditor's Name	Last 4 digits of account number	Ψ_200.00
	Dept. 77304, PO Box 77000	When was the debt incurred? 2016	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Detroit MI 40077	Contingent	
	Detroit MI 48277	Unliquidated	
_ v	City State Zip Code  Vho owes the debt? Check one.	Disputed	
l ř	_		
	Debtor 1 only	T (NONDRIODITY	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
<u> </u>	Debtor 1 and Debtor 2 only	☐ Student loans	
L	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
-	community debt	Debts to pension or profit-sharing plans, and other similar debts	
ls	s the claim subject to offest?		
	No	Other. Specify Medical/Dental Services	
	Yes		

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After lis	sting any entries on this page, number them be	eginning with 4.4, followed by 4.5, and so	o forth.	Total Claim
4.29	MRSI	Last 4 digits of account number2	2936	<b>\$</b> 150.00
	Creditor's Name			
	2250 E Devon Ave Ste 352	When was the debt incurred?	2015-2015	
	Number Street			
		As of the date you file, the claim is: Che	eck all that annly	
		_	sok all that appry.	
	Des Plaines IL 60018	Contingent		
	City State Zip Code	Unliquidated		
<u> </u>	/ho owes the debt? Check one.	Disputed		
<u>[</u>	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured claim	n:	
	Debtor 1 and Debtor 2 only	Student loans		
ΙĒ	At least one of the debtors and another	Obligations arising out of a separation a	greement or divorce	
F	Check if this claim relates to a	that you did not report as priority claims		
-	community debt	Debts to pension or profit-sharing plans,	, and other similar debts	
ls	the claim subject to offest?			
	No	Other. Specify Medical Debt		
	Yes	Cutch. Speeding		
4.30	Reliance Recoveries	Last 4 digits of account number		<b>\$</b> 150.00
	Creditor's Name			
	6160 Summit Dr Ste 420	When was the debt incurred?	2016	
	Number Street			
		As of the date you file, the claim is: Che	eck all that annly	
			sok all that appry.	
	Brooklyn Center MN 55430	Contingent		
	City State Zip Code	Unliquidated		
<u> </u>	/ho owes the debt? Check one.	Disputed		
[	Debtor 1 only			
[	Debtor 2 only	Type of NONPRIORITY unsecured claim	n:	
ΙĒ	Debtor 1 and Debtor 2 only	Student loans		
lī	At least one of the debtors and another	Obligations arising out of a separation a	greement or divorce	
7	Check if this claim relates to a	that you did not report as priority claims		
-	community debt	Debts to pension or profit-sharing plans,		
Is	s the claim subject to offest?			
	No	Other. Specify Collecting for Credi	itor	
ΙĒ	Yes	Curici. Opening	<del></del>	
4.31	Revenue Cycle Solutions/RCS	Last 4 digits of account number		\$ 50.00
1111	Creditor's Name			
	PO Box 7229	When was the debt incurred?	2015	
	Number Street			
		As of the date you file, the claim is: Che	ack all that apply	
		_	sck all that apply.	
	Westchester IL 60154	Contingent		
	City State Zip Code	Unliquidated		
v	Vho owes the debt? Check one.	Disputed		
[	Debtor 1 only			
[	Debtor 2 only	Type of NONPRIORITY unsecured claim	n:	
[	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separation a	greement or divorce	
		that you did not report as priority claims	<b>V</b> <del></del>	
L	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans,	and other similar debts	
ls	s the claim subject to offest?	Debte to pension or pront-snaming plans,	and other allillar ucota	
Ï	No	Other. Specify Credit Card or Cred	tit Use	
	Yes	Other. SpecifyOrealt Gard of Gred		
	<b>_</b>  .~~			

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After listing any entries on this page, number them b	beginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.32 Stanislaus Credit Control Service Inc	Last 4 digits of account number	\$ <u>207.00</u>
Creditor's Name		
914 14th St	When was the debt incurred? 2016	
Number Street		
PO Box 480	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Modesto CA 95353		
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Other. Specify Collecting for Creditor	
Yes	Other. Specify	
4.33 Syncb/CARE CREDIT	Last 4 digits of account number NULL	<b>\$</b> 2,089.00
Creditor's Name	<del></del>	
950 Forrer Blvd	When was the debt incurred? 2010-2013	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
Kettering OH 45420	Contingent	
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Other. Specify Credit Card or Credit Use	
Yes	Officer. Specify	
4.34 TCF of Illinois	Last 4 digits of account number	<b>\$</b> _150.00
Creditor's Name		
4930 N. Milwaukee Ave.	When was the debt incurred? 2012	
Number Street		
	As of the date you file the claim is: Check all that contin	
	As of the date you file, the claim is: Check all that apply.	
Chicago IL 60630	Contingent	
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	that you did not report as priority claims	
Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Other. Specify Credit Card or Credit Use	
Yes	Other, Specify State State St. Stock Soc	

Page 33 of 66 Case Number (if known) Document Jason Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Ventura 21 \$ 3,512.00 Last 4 digits of account number \_ Creditor's Name 2015 375 Ventura Club Dr When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Roselle 60172 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify Debt Owed Yes Village of Roselle \$ 250.00 4.36 Last 4 digits of account number Creditor's Name 2015 31 S Prospect St When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Roselle 60172 IL Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other. Specify Debt Owed

At least one of the debtors and another

Check if this claim relates to a

community debt
Is the claim subject to offest?

No

Official Form 106E/F

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Page 34 of 66 Case Number (if known) **Document** Jason Daniel Debtor 1

List Others to Be Notified for a Debt That You Already Listed

5.	Use this page only if you have others to be notified about you example, if a collection agency is trying to collect from you 2, then list the collection agency here. Similarly, if you have additional creditors here. If you do not have additional personal creditors here.	for a debt you more than on	owe to someone else, list the original e creditor for any of the debts that you	creditor in Parts 1 or listed in Parts 1 or 2, list the
	DuPage County Clerk	-	On which entry in Part 1 or Part 2 lis	st the original creditor?
	Name 421 N County Farm Rd.		Line10_ of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Number Street	-		Part 2: Creditors with Nonpriority Unsecured Claims
	Wheaton IL City State Zip C	60187	Last 4 digits of account number	
	Miller and Steeno, P.C.		On which entry in Bout 4 or Bout 2 li	at the existing exeditor?
	Name	-	On which entry in Part 1 or Part 2 lis	
	11970 Borman Drive, Ste 250	-	Line 10 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
	St. Louis MO	63146	Last 4 digits of account number	
L	City State Zip (	Code		
	DuPage County Clerk	-	On which entry in Part 1 or Part 2 lis	st the original creditor?
	Name 421 N County Farm Rd.		Line 12 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Number Street	•		Part 2: Creditors with Nonpriority Unsecured Claims
		-		
	Wheaton IL	60187	Last 4 digits of account number	
L	City State Zip C	ode		
	Anselmo Lindberg Oliver LLC	-	On which entry in Part 1 or Part 2 lis	st the original creditor?
	Name 1771 West Diehl Rd.		Line 12 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Number Street	-		Part 2: Creditors with Nonpriority Unsecured Claims
		-		
	Naperville IL	60563	Last 4 digits of account number	
L	City State Zip (	Code		
	DuPage County Clerk	-	On which entry in Part 1 or Part 2 lis	st the original creditor?
	Name 421 N County Farm Rd.		Line 35 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
	Wheaton IL	60187	Last 4 digits of account number	
	City State Zip C	- ode		

Debtor 1 Jason

Daniel

Document

Page 35 of 66 Case Number (if known)

Dentor 1 Jason Danier

Last Na

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$0.	.00
nom ruit i	6b. Taxes and Certain other debts you owe the government	6b.	\$0.	.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.	.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	\$0.	.00
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$0.	.00
			Total claim	
Total claims from Part 2	6f. Student loans	6f.	\$0.	.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.	.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.	.00
	6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$32,987.	00
			s 32,987.	00

		Caso 16	151/1 Doc 1	Eilad 05/02/16	Entered 05/03/16 14:39:26	Desc Main
Fill i	n this inf	ormation to identif			6 of 66	Beso Main
Deb	tor 1	Jason	Daniel	Mandelman		
Deb	tor 2	First Name Fany	Middle Name	Last Name <b>Mandelman</b>		
	se, if filing)	First Name	Middle Name	Last Name		
Unit	ed States I	Bankruptcy Court for th	he: <u>NORTHERN</u> District of	_ <u>ILLINOIS(State)</u>		
	e Number			(State)		Check if this is an
	nown)	1000				amended filing
		orm 106G	0 4 4			12/15
			ry Contracts and		Ses are equally responsible for supplying correct	12/10
nforma	ition. If m	ore space is need		e, fill it out, number the en	tries, and attach it to this page. On the top of a	ny
		· -	entracts or unexpired leases	-		
	No. Che	eck this box and sul	bmit this form to the court wit	h your other schedules. Yo	ou have nothing else to report on this form.	
					Schedule A/B: Property (Official Form 106A/B)	
exa	mple, re	nt, vehicle lease, co			Then state what each contract or lease is for (function booklet for more examples of executory co	
	expired le		om you have the contract or	lease	State what the contract or leas	e is for
			•			
2.1						
	Name					
	Number	Street				
	City		State Zi	p Code		
2.2						
	Name					
	Number	Street			•	
	City		State Zi	p Code		
2.3						
	Name					
	Number	Street				
	City		State 7	n Codo		
	City		State Zi	p Code		
2.4						
	Name					
	Number	Street				
	City		State Zi	p Code		
2.5						
	Name					
	Number	Street				
	City		044- 7	n Codo		
	City		State Zi	h coae		

Official Form 106G

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Fill in this in	formation to ide	entify your case:	
Debtor 1	Jason	Daniel	Mandelman
	First Name	Middle Name	Last Name
Debtor 2	Fany		Mandelman
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court f	for the : <u>NORTHERN</u> District of <u>IL</u>	<u>LINOIS</u>
Case Number	-		(State)
(If known)			

### Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

uiiy 7	any Additional Pages, write your name and case number (if known). Answer every question.							
1. [	Oo you	have any codebtors? (If you a	re filing a joint case, do not list eithe	r spouse as a codebto	or.)			
	■ No. □ Yes							
			d in a community property state or Nevada, New Mexico, Puerto Rico, T	= :	ty property states and territories include nd Wisconsin.)			
	No.	Go to line 3.						
	Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No							
	Yes. Inwhich community state or territory did you live? Fill in the name and current address of that person.							
		Name of your spouse, former spouse or	legal equivalent					
		Number Street						
		City	State	Zip Code				
	Schedu Schedu	=	only if that person is a guarantor or edule E/F (Official Form 106E/F), o at Column 2.	_	-			
3.1					Schedule D, line			
	Name	9			Schedule E/F, line			
	Num	ber Street			Schedule G, line			
	City		State	Zip Code				
3.2					Schedule D, line			
	Name	9			Schedule E/F, line			
	Num	ber Street			Schedule G, line			
	City		State	Zip Code				
3.3					Schedule D, line			
	Name				Schedule E/F, line			
	Num	ber Street			Schedule G, line			
	City		State	Zip Code				

Official Form 106H Record # 707350 Schedule H: Your Codebtors Page 1 of 1

Debtor 1	Jason	Daniel	Mandelman		
	First Name	Middle Name	Last Name		
Debtor 2	Fany		Mandelman		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the :NORTHERN DISTRICT OF ILLINOIS  Case Number(If known)					

Che	ck if this is:
	An amended filing
	A supplement showing post-petition
	chapter 13 income as of the following date:
	MM / DD / YYYY

### Official Form 106I

### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Describe Employment						
1.	Fill in your employment information		Debtor 1		Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	X Employed Not employed	1	X Employed Not employed		
	Include part-time, seasonal, or self-employed work.	Occupation	General Manager		Swing Manager		
	Occupation may Include student or homemaker, if it applies.	Employers name	BMD Corporation		BMD Corporation		
		Employers address	888 N La Fox St		888 N La Fox St		
			South Elgin, IL 60	177	South Elgin, IL 60177		
		How long employed there?	20 years		1 month		
Pa	rt 2: Give Details About Monthly	y Income					
	Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.						
				For Debtor 1	For Debtor 2 or non-filing spouse		
2.	<ol> <li>List monthly gross wages, salary and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.</li> </ol>			\$5,866.16	\$420.00		
3.	3. Estimate and list monthly overtime pay.			\$0.00	\$0.00		
4.	Calculate gross income. Add line	2 + line 3.		\$5,866.16	\$420.00		

 Official Form 106I
 Record # 707350
 Schedule I: Your Income
 Page 1 of 2

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Debtor 1

 Jason
 Daniel
 Mandelman

 First Name
 Middle Name
 Last Name

Case Number (if known) \_

				For Debtor 1	For Debtor 2 non-filing spo		
	Copy	line 4 here	4.	\$5,866.16	\$420.	00	
5. <b>L</b>	ist all	payroll deductions:	•				
	5a. <b>T</b>	ax, Medicare, and Social Security deductions	5a.	\$751.60	\$	84.00	
	5b. <b>N</b>	landatory contributions for retirement plans	5b.	\$0.00		\$0.00	
	5c. <b>V</b>	oluntary contributions for retirement plans	5c.	\$0.00		\$0.00	
	5d. <b>F</b>	Required repayments of retirement fund loans	5d.	\$0.00		\$0.00	
	5e. <b>I</b>	nsurance	5e.	\$417.12		\$0.00	
	5f. <b>C</b>	Oomestic support obligations	5f.	\$0.00		\$0.00	
	5g. <b>L</b>	Inion dues	5g.	\$0.00		\$0.00	
	5h. <b>C</b>	Other deductions. Specify:	5h.	\$0.00		\$0.00	
6. <b>A</b>	dd the	payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$1,168.72	9	884.00	
7. C	alcula	te total monthly take-home pay. Subtract line 6 from line 4.	7.	\$4,697.44	\$336.0	0	
8. <b>L</b> i	st all	other income regularly received:					
	8a.	Net income from rental property and from operating a business,					
		profession, or farm					
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					
		monthly net income.	8a.	\$0.00		\$0.00	
	8b.	Interest and dividends	8b.	\$0.00		\$0.00	
	8c.	Family support payments that you, a non-filing spouse, or a	8c.	\$ 0.00		0.00	
		dependent regularly receive	_				
		Include alimony, spousal support, child support, maintenance, divorce					
		settlement, and property settlement.					
	8d.	Unemployment compensation	8d	\$0.00		\$0.00	
	8e.	Social Security	8e.	\$0.00		\$0.00	
	8f.	Other government assistance that you regularly receive	8f.	\$0.00		\$0.00	
		Include cash assistance and the value (if known) of any non-cash					
		assistance that you receive, such as food stamps (benefits under the					
		Supplemental Nutrition Assistance Program) or housing subsidies.					
		Specify:					
	8g.	Pension or retirement income	8g. _	\$0.00		\$0.00	
	8h.	Other monthly income. Specify:	8h. _	\$0.00		\$0.00	
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9	\$0.00		\$0.00	
10.	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$4,697.44 +	\$336.0	0 =	\$5,033.44
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L	ψ <del>1</del> ,001.111	Ψ000.0		ψ3,033.44
11.	Inclu	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not seen that the s	our depende	•			
		ify:				11.	\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Ce		•	t applies	12.	\$5,033.44
13.		ou expect an increase or decrease within the year after you file this form			• •		
	X						

Fill in this i	nformation to identify y	our case:				
Debtor 1	Jason	Daniel	Mandelman	Check if this is:		
	First Name	Middle Name	Last Name	An amende	ŭ	
Debtor 2 (Spouse, if filing)	Fany First Name	Middle Name	Mandelman  Last Name	· · ·		-petition chapter 13
United State	s Bankruptcy Court for the	NORTHERN DISTRICT O	F ILLINOIS		of the following o	iale.
Case Numbe	er		_	MM / DD / Y	YYYY	
	orm 106J				_	2 because Debtor 2
	_			maintains a	a separate house	nola.
	le J: Your Ex					12/14
-			·	e equally responsible for supplyi s, write your name and case nun	=	
Part 1:	Describe Your Househol	d				
1. Is this a jo	oint case?					
	Go to line 2.					
X Yes.	Does Debtor 2 live in a	separate household?				
	X No.	ust file a separate Schedu	e .I			
2. Do you	have dependents?	No		Dependent's relationship to	Dependent's	Does dependent live
Do not Debtor	list Debtor 1 and		this information for	Debtor 1 or Debtor 2	age	with you?
		each depen	dent	Son	19	X Yes
names.	state the dependents'					No
				Son	16	X Yes
						No
				Son	13	X
				Can	44	No
				Son	11	Yes
						X No
						Yes
-	r expenses include es of people other than	X No				
	f and your dependents	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Part 2:	Estimate Your Ongoing	Monthly Expenses				
	•		•	is a supplement in a Chapter 13	•	
the applicable		ruptcy is filed. If this is a	supplemental <i>Schedule J</i> , cr	neck the box at the top of the for	m and fill in	
	•	_	nce if you know the value		,	our expenses
or such assis	tance and have include	ed it on Schedule I: Your	Income (Official Form 106l.)			our expenses
	-	expenses for your resid	ence. Include first mortgage p	ayments and	4.	\$1,850.00
	It for the ground or lot.				4.	ψ1,000.00
4a. R	eal estate taxes				4a.	\$0.00
	roperty, homeowner's, c	r renter's insurance			4b.	\$0.00
		ir, and upkeep expenses			4c.	\$50.00
4d. H	omeowner's association	or condominium dues			4d.	\$0.00

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Debtor 1 Jason

Daniel

Document

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Case Number (if known) \_\_ First Name Middle Name Last Name Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$280.00 6a. 6a. Electricity, heat, natural gas \$75.00 6b. Water, sewer, garbage collection \$400.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$700.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$120.00 9. Clothing, laundry, and dry cleaning 10. \$75.00 10. Personal care products and services \$50.00 11. Medical and dental expenses 11. \$382.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$50.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 Charitable contributions and religious donations 14. 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$164.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$419.00 17a. 17a. Car payments for Vehicle 1 \$377.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

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Daniel Jason Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name \$30.00 Pet Care (\$30.00), 21. 21. Other. Specify: \$5,022.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$5,033.44 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$5,022.00 23b. Copy your monthly expenses from line 22 above. 23b.-\$11.44 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 707350 Schedule J: Your Expenses Page 3 of 3

Fill in this in	formation to iden	tify your case:	
Debtor 1	Jason	Daniel	Mandelman
	First Name	Middle Name	Last Name
Debtor 2	Fany		Mandelman
(Spouse, if filing)	First Name	Middle Name	Last Name
		r the : <u>NORTHERN</u> District of	<u>ILLINOIS</u>
Case Number			(State)
(If known)			

### Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorned	ey to help you fill out bankruptcy forms?
Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summ correct.	nary and schedules filed with this declaration and that they are true and
🗶 /s/ Jason Daniel Mandelman	🗶 /s/ Fany Mandelman
Signature of Debtor 1	Signature of Debtor 2
Date 05/02/2016 MM / DD / YYYY	Date 05/02/2016 MM / DD / YYYY

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Fill in this in	nformation to ide		
Debtor 1	Jason	Daniel	Mandelman
	First Name	Middle Name	Last Name
Debtor 2	Fany		Mandelman
(Spouse, if filing)	First Name	Middle Name	Last Name
	. ,	or the : <u>NORTHERN</u> District of	ILLINOIS (State)
Case Number (If known)	r		<del></del>

### Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

lullibei	(ii known). Answer every question.						
Part	1: Give Details About Your Marital Status and Whe	ere You Lived Before					
01. <b>W</b> r	nat is your current marital status?						
_	<u> </u>						
	Married  Not married						
L	Not married						
02 <b>D</b> u	ring the last 3 years, have you lived anywhere othe	er than where you live no	w?				
	No.	in than who you have he					
	Yes. List all of the places you lived in the last 3 years	s. Do not include where	ou live now.				
	Debtor 1	Dates Debtor 1	Debtor 2:	Dates Debtor 2			
		lived there	Same as Debtor 1	lived there			
	F26 F Cropyillo Ave	EDOM 06/2004	Same as Debior 1	Same as Debtor 1			
	536 E Granville Ave Roselle IL 60172-1441	FROM 06/2004 To 02/2015					
	Noselle IL 00172-1441	10 02/2013					
	thin the last 8 years, did you ever live with a spous						
	operty states and territories include Arizona, Califo d Wisconsin.)	rmia, idano, Louisiana, N	evada, New Mexico, Puerto Rico, Texas	s, wasnington,			
	No.						
	Yes. Make sure you fill out Schedule H: Your Codeb	otors (Official Form 106H)					
Part :	Explain the Sources of Your Income						
- Gard	Explain the Sources of Four Income						

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Document Page 45 of 66 Debtor 1 Jason Daniel Mandelman Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$23,464 \$120 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$74,034 \$0.00 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, Wages, commissions. \$62,446 \$14,560 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

Entered 05/03/16 14:39:26 Desc Main Case 16-15141 Doc 1 Filed 05/03/16 Page 46 of 66 Document Jason Daniel Mandelman Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments ALLY Financial 200 Renaissance \$ 16,702 \$ 1,131 Mortgage Car Ctr Detroit MI 48243 Credit card Loan repayment Suppliers or vendors Other CHASE Po Box 901003 \$ 1,257 <u>\$ 10,418</u> Mortgage Car Columbus OH 43224 Credit card Loan repayment Suppliers or vendors Other \_\_\_\_ Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment

payment paid Case 16-15141 Doc 1 Filed 05/03/16 Entered 05/03/16 14:39:26 Desc Main Document Page 47 of 66

Debtor 1	Jason	Daniel	Mandelman	Case Number (if known	)					
	First Name	Middle Name	Last Name							
08 Wi	ithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited									
	n insider? clude payments on debts guaranteed or cosigned by an insider.									
inc	aude payments on de	bts guaranteed or cosigne	ed by an insider.							
	No.									
	Yes. List all paymen	ts to an insider.								
				tal amount Amount you still	Reason for this payment					
			payment pa	id owe	Include creditor's name					
Part	Identify Legal a	ctions, Repossessions, an	d Foreclosures							
				irt action, or administrative proceeding?						
	it all such matters, incodifications, and contr		ses, small claims actions, divorce	es, collection suits, paternity actions, supp	oort or custody					
_		aci disputes.								
<u> </u>	No.									
	Yes. Fill in the detail	S.								
			Nature of the case	Court or agency	Status of the case					
	Arrow Financial Se	ervices Llc VS Jason	Contract	DuPage County, IL	Pending					
	Mandelman				On appeal					
	CASE NUMBER#0	9SR1849			Concluded					
	Ventura 21		Eviction	DuPage County, IL	Pending					
	VS Jason Mandelr	nan			On appeal					
	CASE NUMBER#1	15LM1762			Concluded					
	Bank Of New York	Mellon VS Jason	Foreclosure	DuPage County, IL	Pending					
	Mandelman				On appeal					
	CASE NUMBER#1	15CH499			O a made al					
					<del>_</del>					
10 Wi	thin 1 year before you	ı filed for bankruptcy, was	any of your property repossess	ed, foreclosed, garnished, attached, seize	ed, or levied?					
Ch	eck all that apply and	fill in the details below.								
	No. Go to line 11									
	Yes. Fill in the inforr	nation below.								
		·		ank or financial institution, set off any a	mounts from your accounts					
or	refuse to make a pay	ment because you owed	d a debt?							
	No. Go to line 11									
	Yes. Fill in the inforr	nation below.								
	-			possession of an assignee for the bene	it of creditors, a					
_		er, a custodian, or anothe	er omiciai?							
	No. Yes.									
	163.									
Part	List Certain Gif	ts and Contributions								
13 <b>W</b> i	thin 2 years before y	ou filed for bankruptcy,	did you give any gifts with a to	tal value of more than \$600 per person?						
	No.									
_	Yes. Fill in the detail	s for each gift								
			did you give any gifts or contri	butions with a total value of more than	6600 to any charity?					
		u .or ballmaptoy,	jeu g anj gnta di dditti	and the state of t	w any enality i					
	No.	la forma a la sife								
L	Yes. Fill in the detail	s for each gift.								

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Debto	or 1	Jason	Daniel	Mandelman	Case Number (if kr.	own)					
		First Name	Middle Name	Last Name							
P	art 6:	List Certain Losses									
15	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?  No.  Yes. Fill in the details for each gift.										
	art 7:										
16	abo	Vithin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted bout seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.									
		No.									
		Yes. Fill in the details									
	F	Party Contact Info		Description and value of any	property transferred	Date payment or transfer	Amount of payment				
		Geraci Law L.L.C.					Payment/Value:				
		55 E. Monroe Street #3400	)				\$2,295.00: \$1,165.00 paid prior to filing,				
		Chicago,IL 60603					balance to be paid				
							after case filing.				
	ŗ	Party Contact Info		Description and value of any	property transferred	Date payment	Amount of payment				
				0		or transfer					
		Hananwill Credit Counselin	ng	Credit Counseling Services		2016	\$25.00				
		115 N. Cross St.									
		Robinson, IL 62454									
17	pror		your creditors or to n	nake payments to your credito	ur behalf pay or transfer any pro ors?	perty to anyone w	rho				
	_	No.									
	Π,	Yes. Fill in the details.									

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Debtor	1	Jason	Daniel	Mandelman	3	Case	Number (if known)				
		First Name	Middle Name	Last Name							
t I	ran: nclu	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property ransferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). On not include gifts and transfers that you have already listed on this statement.									
	<u> </u>		l:f4								
		Yes. Fill in the details for ea	ach gift.								
				Description and value o transferred	f property		ne any property or payment s paid in exchange	s received	Date transfer was made		
	<u>E</u> - -	BFP for Value		Debtors sold their forr residence located at 8 Granville, Roselle, IL short sale March 2016 PROCEEDS RECEIV	536 E 60172 at 5; NO	\$0 (sho	ort sale)		March 7 2016		
	Р	Person's relationship to you	No Relation								
ı	With bend		ed for bankruptcy, did called asset-protectio	you transfer any property n devices.)	to a self-settled	l trust or	similar device of which	you are a			
Pa	rt 8:	List Certain Financial	Accounts, Instruments,	Safe Deposit Boxes, and Sto	orage Units						
1	ncli hou:		eratives, associations,	financial accounts; certific and other financial institu digits of account number	·		Date account was closed, sold, moved, or transferred	brokerage  Last balance bef closing or transf			
	casi	you now have, or did you h, or other valuables? No.	have within 1 year befo	ore you filed for bankrupto	cy, any safe dep	osit box	or other depository for	securities,			
		Yes. Fill in the details.									
,			Who els	se had access to it?	Describ	e the cont	ents	Do you still have it?			
22	Hav	e you stored property in a	storage unit or place	other than your home with	nin 1 year before	you file	d for bankruptcy?				
		No. Yes. Fill in the details.									
		res. I ili ili tile details.	Who els	se has or had access to it?	Describe	e the cont	ents	Do you still have it?			
Po	rt 9:	Identify Property You	Hold or Control for Some	eone Else							
		, , ,		else owns? Include any pro	operty you borro	owed from	n, are storing for, or ho	ld in trust			
1		someone.									
		No. Yes. Fill in the details.	Where i	s the property?	Describe	e the prop	erty	Value			

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Document Daniel Mandelman

Last Name

Middle Name

Case Number (if known) \_

P	art 10:	Give Details About Environmental Information							
For	the purp	oose of Part 10, the following definition	ons apply:						
	hazardo	nvironmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of azardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
		te means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize or used to own, operate, or utilize it, including disposal sites.							
		us material means anything an envir ce, hazardous material, pollutant, cor	onmental law defines as a hazardous was ntaminant, or similar term.	ste, hazardous substance, toxic					
Rep	ort all n	otices, releases, and proceedings tha	at you know about, regardless of when th	ey occurred.					
24	Has any	governmental unit notified you that	you may be liable or potentially liable un	der or in violation of an environmental la	w?				
	No.	Cill in the details							
	∐ Yes.	Fill in the details.	Governmental unit	Environmental law, if you know it	Date of notice				
25	Have yo	ou notified any governmental unit of a	any release of hazardous material?						
	No.								
	Yes	Fill in the details.	Governmental unit	Environmental law, if you know it	Date of notice				
26	Have vo	u hoon a narty in any judicial or adm	inistrative proceeding under any environ	mental law? Include settlements and ord	ars				
	No.	na been a party in any judicial or aum	mistrative proceeding under any environ	mentariaw: moluue settlements and ord	613.				
	=	. Fill in the details.							
			Court or agency	Nature of the case	Status of the case				
P:	art 11:	Give Details About Your Business or C	onnections to Any Business						
		Lyears before you filed for hankrunte	cy, did you own a business or have any o	f the following connections to any busing	2000				
	_		a trade, profession, or other activity, eith	-	5551				
			ny (LLC) or limited liability partnership (L	•					
		A partner in a partnership		,					
		An officer, director, or managing exec	cutive of a corporation						
		An owner of at least 5% of the voting	or equity securities of a corporation						
	No.	None of the above applies. Go to Part	12.						
	Yes	. Check all that apply above and fill in t	he details below for each business.						
28		2 years before you filed for bankrupto ons, creditors, or other parties.	ey, did you give a financial statement to a	nyone about your business? Include all t	financial				
	No.								
	Yes	. Fill in the details.							
			Date issued						

Debtor 1

Jason

First Name

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 Debtor 1
 Jason
 Daniel
 Mandelman
 Case Number (if known)

 First Name
 Middle Name
 Last Name

Part 12: Sign Below								
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.								
🗶 /s/ Jason Daniel Mandelman	/s/ Fany Mandelman							
Signature of Debtor 1	Signature of Debtor 2							
Date 05/02/2016  MM / DD / YYYY  Did you attach additional pages to Your Statement of Financial Affairs	Date 05/02/2016  MM / DD / YYYY  s for Individuals Filing for Bankruptcy (Official Form 107)?							
. U	, , , ,							
Yes								
Did you pay or agree to pay someone who is not an attorney to help y	Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?							
No								
Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).							

Eilad 05/02/16 Entered 05/03/16 14:39:26 Fill in this information to identify your case: 2 of 66 Daniel Mandelman Jason Debtor 1 First Name Middle Name Last Name Fany Mandelman Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the : <u>NORTHERN DISTRICT OF ILLINOIS EASTERN</u> DIVISION District of ILLINOIS Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors,

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

write your name and case number (if known).

For any creditors information below	-	s Who Have Claims Secured by Property (Official Form 106D	), fill in the	
Identify the credite	or and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's name:  Description of property securing debt:	ALLY Financial  2010 Cadillac STS with over 109,000 miles	<ul> <li>☐ Surrender the property</li> <li>☐ Retain the property and redeem it</li> <li>☐ Retain the property and enter into a Reaffirmation Agreement.</li> <li>☐ Retain the property and [explain]:</li> </ul>	■ No □ Yes	
Creditor's name:  Description of property securing debt:	CHASE  2009 Cadillac SRX with over 115,000 miles	<ul> <li>☐ Surrender the property</li> <li>☐ Retain the property and redeem it</li> <li>☐ Retain the property and enter into a Reaffirmation Agreement.</li> <li>☐ Retain the property and [explain]:</li> </ul>	■ No □ Yes	
Creditor's name:  Description of property securing debt:		Surrender the property Retain the property and redeem it Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	□ No □ Yes	
Creditor's name:  Description of property securing debt:		Surrender the property Retain the property and redeem it Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	□ No □ Yes	

Debtor 1

Jason

Case 16-15141

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First Name

**List Your Unexpired Personal Property Leases** 

For any unexpired personal property lease that you li	isted in Schedule G: Executory Contracts and Unexpired Lease	es (Official Form 106G),
fill in the information below. Do not list real estate lea	ases. Unexpired leases are leases that are still in effect; the lease	se period has not yet
ended. You may assume an unexpired personal prop	erty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	2).
Describe your unexpired personal property lease	s	Will the lease be assumed?
Lessor's name:		□ No
Description of leased property:		
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		□No
Description of leased property:		□Yes
Lessor's name:		□No
Description of leased property:		□Yes
Lessor's name:		□No
Description of leased property:		□Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indicate personal property that is subject to an unexpired lease	d my intention about any property of my estate that secures a c e.	debt and any
/s/ Jason Daniel Mandelman Signature of Debtor 1	/s/ Fany Mandelman Signature of Debtor 2	-
Date Dated: 05/02/2016	Date Dated: 05/02/2016	

Official Form 108

MM / DD / YYYY

Record # 707350

Date \_\_Dated: 05/02/2016 MM / DD / YYYY

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

n re	
Jason Daniel Mandelman and Fany Mandelman /	Case No:
Debtors	Chapter: Chapter 7
DISCLOSURE OF	F COMPENSATION OF ATTORNEY FOR DEBTOR
Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2	2016(b), I certify that I am the attorney for the above named debtor(s) and that
compensation paid to me within one year before the filin	ng of the petition in bankruptcy, or agreed to be paid to me, for services contemplation of or in connection with the bankruptcy case is as follows:
For legal services, I have agreed to accept	\$2,295.00
Prior to the filing of this statement I have received	\$1,165.00
Balance Due	\$1,130.00
2. The source of the compensation paid to me was:	
Debtor(s) Other: (specify	
The source of compensation to be paid to me is:	
Debtor(s) Other: (specify	
I have not agreed to share the above-disclosed	compensation with any other person unless they are members and associates
of my law firm.	
I have agreed to share the above-disclosed con	npensation with a other person or persons who are not members or associates
5. In return for the above-disclosed fee, I have agreed	to render legal service for all aspects of the bankruptcy
case, including:	
a. Analysis of the debtor's financial situation, and bankruptcy;	d rendering advice to the debtor in determining whether to file a petition in
b. Preparation and filing of any petition, schedule	es, statements of affairs and plan which may be required;
c. Representation of the debtor at the meeting of	creditors and confirmation hearing, and any adjourned hearings thereof;
<ol> <li>By agreement with the debtor(s), the above-disclose</li> </ol>	ed fee does not include the following service:
	ourt dates, amendments to schedules, adversary complaints or conversions to anothe
chapter, judicial lien avoidances, dischargeability actions	s, other contested matters except the first meeting of creditors.
	CERTIFICATION
I certify that the foregoing is a compayment to	aplete statement of any agreement or arrangement for
me for representation of the debtor(s) in	n this bankruptcy proceedings.
Date: 05/02/2016	/s/ Daniel Fasman
Date	Signature of Attorney
	Geraci Law L.L.C.
	Name of law firm

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Case 16-15141 Doc 1 Filed U5/1160 National Headquarters: 55 E. Monroe Street, #3400 Document 436/ Encage illeged 05/23/16014 apage acil Dese Main

Date: 4/11/2016

Consultation Attorney:

Record #: 707-350



### **Chapter 7 Retainer Agreement**

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter7 bankruptcy under the following terms and conditions:

This amount does NOT INCLUDE court filing fees of \$335, or costs Attorney fees for the Chapter 7 bankruptcy are \$ 229 for credit counseling or financial management classes. This fee is based on the anticipated amount of work required to complete my case, and upon the information I have provided to date. If any information is incomplete or incorrect, the advice or Chapter may have to change, and this fee may have to be adjusted. This fee includes all work in the representation of my normal Chapter7, including preparation of my bankruptcy petition, schedules and other documents, first341 meeting, reaffirmations, normal correspondence with my creditors and myself, but does NOT include excessive work caused by you, missed341 meetings, reopening the case, amendments to schedules, work on audits or asset cases, objections to exemptions, conversion to another chapter, evidentiary hearings, other contested matters or motions, or adversary proceedings, because these cannot be predicted in setting a flat fee. For work done on these matters, we bill between \$275/hr and \$450/hr for attorney time, based on the attorney doing the work, and \$85 to \$125/hr paralegal time. I agree that more than one attorney and paralegal will work on my case.

Fees are "flat fees" and "advance payment retainers" for pre-filing work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". You may elect to be billed on an hourly basis, but we have found a flat fee is cheaper and benefits you. If this contract is terminated by either party prior to the filing of the case, the firm will refund unearned fees based on the above rates with an accounting, and on request, submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filling fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

I understand that bankruptcy laws only allow me to protect a certain amount of my property, and if I have any unprotected property, I understand my Chapter 7 Trustee can sell it if I do not or cannot buy out the Trustee's interest and that the U.S. Trustee may object to my filing a Chapter 7 if they believe I have excess income and should be filing a Chapter 13.

I agree to fully cooperate with my attorneys and provide all information requested at any point during the case. I understand that if I do not fully cooperate or provide complete and accurate information, my attorneys may withdraw from representation of me, with the permission of the Court.

If I have secured debts that I wish to retain (mortgages, financed vehicles or other financed property) that I may be required to sign a reaffirmation agreement with the creditor in order to keep the property, and I must remain current on my payments. Many mortgage and car companies refuse to reaffirm the debt but we have found that if you keep up your payments you keep the property anyway.

Debts not discharged if they not paid in full: student loans; educational debts & tuition; most tax debts: unfiled, trust fund or late filed tax; undisclosed debts; support/maintenance debts; fines, debts incurred by fraud, or after the case is filed, future condo/HOA dues,or debts listed in your red or green folder as usually not discharged, or found non-dischargeable by a Judge.

Representation limited to Bankruptcy Court We don't represent you in state court, or loan modifications or similar matters.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition.

I understand that if Mail to take my financial management class after filing but before discharge, my case may be closed without a discharge, and I will be required to pay fees and costs to have it reopened. I have received the 11U.S.C § 527(a) disclosures.

Dated:

nan(Debtor

FanyMandelman (Joint Debtor)

otor(s), Representing Geraci Law L.L.C. rev 150511 Attorney for

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

Jason Daniel Mandelman and Fany Mandelman / Debtors

In re

Bankruptcy Docket #:

Judge:

### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

#### Document Page 57 of 66 In re Jason Daniel Mandelman and Fany Mandelman / Debtors

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

UNITED STATES BANKRUPTCY COURT

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

Jason Daniel Mandelman and Fany Mandelman / Debtors

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 05/02/2016	/s/ Jason Daniel Mandelman		
	Jason Daniel Mandelman		
Dated: 05/02/2016	/s/ Fany Mandelman		
	Fany Mandelman		
Dated: 05/02/2016	/s/ Daniel Fasman		
	Attorney: Daniel Fasman		

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Debtor	1 Jason	Daniel	Mandelman	Case Number (if known)				
Deproi	First Name	Middle Name	Last Name					
Part	6: Answer These Question	s for Reporting Purp	poses					
	What kind of debts do you have?	as "incun	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
		Yes.	Go to line 16b. Go to line 17.					
		16b. <b>Are yo</b> u money fo	ır debts primarily business deb or a business or investment or through	ots? Business debts are debts that yogh the operation of the business or inv	u incurred to obtain restment.			
			Go to line 16c. Go to line 17.					
		16c. State the	e type of debts you owe that are not	consumer debts or business debts.				
17.	Are you filing under Chapter 7?	<del></del>	m not filing under Chapter 7. Go to					
	Do you estimate that after		m filing under Chapter 7. Do you es Iministrative expenses are paid that	stimate that after any exempt property funds will be available to distribute to	is excluded and unsecured creditors?			
	any exempt property is excluded and		No.					
	administrative expenses are paid that funds will be available for distribution	[	Yes.					
	to unsecured creditors?		Пар	00 E 000	<b>25,001-50,000</b>			
18.	•	<b>■</b> 1-49 <b>□</b> 50-99	· · ·	00-5,000 01-10,000	☐ 50,001-100,000			
***************************************	you estimate that you	☐ 100-19	<b>=</b> ::	001-25,000	☐ More than 100,000			
	owe?	200-99		•				
				000,001-\$10 miltion	□\$500,000,001-\$1 billion			
19.	How much do you	\$0-\$50		0,000,001-\$50 million	□\$1,000,000,001-\$10 billion			
	estimate your assets to		· · · · · · · =	0,000,001-\$100 million	□\$10,000,000,001-\$50 billion			
	be worth?		0. 4000,000	00,000,001-\$500 million	☐ More than \$50 billion			
				,000,001-\$10 million	☐\$500,000,001-\$1 billion			
20.	How much do you	\$0-\$50		0,000,001-\$50 million	☐ \$1,000,000,001-\$10 billion			
	estimate your liabilities			0,000,001-\$100 million	☐ \$10,000,000,001-\$50 billion			
	to be?				☐ More than \$50 billion			
		□ \$500,0	01-\$1 million	00,000,001-\$500 million				
Pa	Sign Below			·				
Fo	ryou	I have exam correct.	ined this petition, and I declare unde	er penalty of perjury that the information	on provided is true and			
NOTE THE PROPERTY OF THE PROPE		If I have cho of title 11, U under Chapt	nited States Code. I understand the	rare that I may proceed, if eligible, und relief available under each chapter, a	ier Chapter 7, 11,12, or 13 nd I choose to proceed			
		If no attorne this docume	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
***************************************		I request rel	ief in accordance with the chapter o	f title 11, United States Code, specifie				
		l understand with a bank	d making a false statement, conceal ruptcy case can result in fines up to	ing property, or optaining money or pr \$250,000, or imprisonment for up to 2	operty by fraud in connection 0 years, or both.			
***************************************		18 U.S.C. §	§ 152, 1341, 1519, and 3571.					
***************************************		<b>x</b>		x 4	C Dahlan S			
***************************************		Signa	ture of Debtor 1	Signature	<b>1</b> 5 7			
***************************************		Exec	uted on :	Executed of	on : ///2016 MM / DD / YYYY			

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Fill in this inf	Fill in this information to identify your case:						
Debtor 1	Jason	Daniel	Mandelman				
50210.	First Name	Middle Name	Last Name				
Debtor 2	Fany		Mandelman				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the	: <u>NORTHERN</u> District o	f <u>ILLINOIS</u> (State)				
Case Number (If known)							

### Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney	to help you fill out bankruptcy forms?
	,
No No	Deliver Described Production and
Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summa	ry and schedules filed with this declaration and that they are true and
correct.	
×	×
Signature of Debtor 1	Signature of Debtor 2
5,22016	Date 5 02 /2016
Date MM / DD YYYY	MM / DD / YYYY
Total Control of the	

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Case Number (if known) \_

Mandelman

Last Name

Daniel

Middle Name

Jason

First Name

	!
Part 41: Give Details About Your Business or Connections to Any Business	
27 Within 4 years before you filed for bankruptcy, did you own a business	or have any of the following connections to any business?
Within 4 years before you filed for bankruptcy, did you own a business	ar activity, either full-time or part-time
A sole proprietor or self-employed in a trade, profession, or other	
A member of a limited liability company (LLC) or limited liability	partnersnip (LLP)
A partner in a partnership	
An officer, director, or managing executive of a corporation	
An owner of at least 5% of the voting or equity securities of a co	rporation
No. None of the above applies. Go to Part 12.	
Yes. Check all that apply above and fill in the details below for each but	isiness.
institutions, creditors, or other parties.  No.  Yes. Fill in the details.	
Date Issued	
Part 12: Sign Below	
Signature	it, concealing property, or obtaining money or property by made
Did you attach additional pages to <i>Your Statement of Financial Affairs</i> ■ No  ■ Yes	for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an attorney to help yo	u fill out bankruptcy forms?
■No	
	. Attach the Bankruptcy Petition Preparer's Notice,
Yes. Name of person	Declaration, and Signature (Official Form 119).

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Desc Main

Jason

Daniel

Mandelman

Debtor 1 First Name

_	_	•	•	~							
	Ca	se	N	umber	(if	knowi	ı) _		_	 	

ŗ	*	2	

List Your Unexpired Personal Property Leases

rait 2.	
For any une	xpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G),
fill in the inf	ormation below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet
ended You	may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).
cilaca, iou	may and the second of the seco

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	□No □ □Yes
Description of leased property:	∐Yes
Lessor's name:	□No
Description of leased property:	□Yes
Lessor's name:	□ No
Description of leased property:	☐Yes
Lessor's name:	□ No
Description of leased property:	Yes

Part 3:

Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any

personal property that is subject to an unexpired lease.

Signature of Debtor

Date Dated:

Signature of Debto

Dated MM / DD / YYYY

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## DISCLAIMER Debtors have read and agree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfilled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume

18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be projected, that the trustee might object if I/we have excess income, or change in 8tars? Federal or Bankruptcy laws before the case

is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATELY X Date & Sign 24/2016 Dated: 3 Jason Daniel Mandelman X Date & Sign Mandelman

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### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Jason Daniel Mandelman and Fany Mandelman / Debtors

Bankruptcy Docket #:

Judge:

### VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER	PENALTY OF PERJURY THAT THE FOREGOING IS TO	RUE AND CORRECT.
Dated: 5 1 2 12016	Jason Daniel Mandelman	X Date & Sign
Dated: 5 / 2 2016	Fany Mandelman	X Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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Debtor 1	Jason	Daniel	Mandelman		Case Nu	ımber (if known) _		<del></del>
	First Name	Middle Name	Last Name					
					Columi Debtor	910.0004.04 ST000X010101	Column B Debtor 2 or non-filing spouse	
							40.00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
8. Unen	ployment compe	nsation			<del></del>	\$0.00	\$0.00	CARRENO COSTO
Do no unde	ot enter the amoun r the Social Securi	t if you contend that the amount ty Act. Instead, list it here:	received was a benefit					
Fory	ou							***************************************
Fory	our spouse							
9. <b>Pen</b> s	sion or retirement efit under the Socia	income. Do not include any ame al Security Act.	ount received that was a		<u> </u>	\$0.00	\$0.00	300000000000000000000000000000000000000
Dor	ot include any ber victim of a war cri	sources not listed above. Spec nefits received under the Social S me, a crime against humanity, or , list other sources on a separate	security Act or payments rec international or domestic					ALLECTOR SECTION AND AND AND AND AND AND AND AND AND AN
						\$0.00	\$ 0.00	•
10a.					\$	0.00	\$0.00	
10b. 10c.		m separate pages, if any.				\$0.00	\$0.00	•
11 Cale	rulate vour total c	urrent monthly income. Add line total for Column A to the total for	es 2 through 10 for each · Column B.			\$5,866.16 +	\$420.00	= \$6,286.16
								areas control of the
Part 2		Whether the Means Test Applies (						
12. Cal	culate your currer	nt monthly income for the year. current monthly income from line	Follow these steps:		Copy	line 11 here	12a.	\$6,286.16
12a.			3 1 I				•	x 12
		the number of months in a year).					12b.	\$75,433.92
12b.		ur annual income for this part of						¥,
13. Cal	culate the median	family income that applies to y	ou. Follow these steps:					***************************************
Fill	in the state in whic	ch you live.	1L					***************************************
Fill	in the number of p	eople in your household.	6					
· +-	end a list of applic	ily income for your state and size able median income amounts, go rm. This list may also be availabl	online using the link specif	ied in the sep	arate		13.	\$103,721.00
1	w do the lines cor							
14a	Go to Part 3.	ess than or equal to line 13. On the	•					
14b	. Line 12b is m Go to Part 3	nore than line 13. On the top of p and fill out Form 122A-2.	age 1, check box 2, The pre	esumption of	abuse is deter	mined by Form	122A-2.	
Part	3: Sign Belov	N				<del></del>		
	By signing here	e, I declare under penalty of perjo	ury that the information on th	is statement	and in any att	achments is true	e and correct.	
			/		4			•
		Jason Daniel Mandelma	n		Fany	<b>Mandelmar</b>	· ·	
, suppressed the second	Date:: _	5/2/12016		Date::_	05/2	/2016		
***************************************	-	l line 4a, do NOT fill out or file F						
***************************************	If you checked	i line 14b, fill out Form 122A-2 ar	nd file it with this form.					**************************************

Form B 201A, Notice to Consumer Debtor(s)

In re Jason Daniel Mandelman and Fany Mandelman / Debtors

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

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WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 5 / 1/2016

Dated: 5 / 1/2016

Dated: 5 / 1/2016

Attorney: Daniel Fasman

X Date & Sign

X Date & Sign